

B1 (Official Form 1)(4/10)

**United States Bankruptcy Court
District of Nevada**

Voluntary Petition

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Name of Debtor (if individual, enter Last, First, Middle): Thompson, Tracy S | | Name of Joint Debtor (Spouse) (Last, First, Middle): Taylor, Loryn G | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): AKA Dawn Marie Gerling; AKA Dawn Marie Grate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-8390 | | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-5922 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Street Address of Debtor (No. and Street, City, and State): 5336 Byron Nelson Ln. Las Vegas, NV ZIP Code 89149 | | Street Address of Joint Debtor (No. and Street, City, and State): 5336 Byron Nelson Ln. Las Vegas, NV ZIP Code 89149 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| County of Residence or of the Principal Place of Business: Clark | | County of Residence or of the Principal Place of Business: Clark | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mailing Address of Debtor (if different from street address): ZIP Code | | Mailing Address of Joint Debtor (if different from street address): ZIP Code | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Location of Principal Assets of Business Debtor (if different from street address above): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Debtor (Form of Organization) (Check one box) | | Nature of Business (Check one box) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.) | | <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other TAX-EXEMPT ENTITY (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Nature of Debts (Check one box) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Filing Fee (Check one box) | | Chapter 11 Debtors | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. | | Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (<i>amount subject to adjustment on 4/01/13 and every three years thereafter</i>). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Statistical/Administrative Information *** David Krieger, Esq. 9086 *** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Estimated Number of Creditors <table style="margin-left: auto; margin-right: auto;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1,000-5,000</td> <td>5,001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>50,001-100,000</td> <td>OVER 100,000</td> </tr> </table> Estimated Assets <table style="margin-left: auto; margin-right: auto;"> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table> Estimated Liabilities <table style="margin-left: auto; margin-right: auto;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>\$0 to \$50,000</td> <td>\$50,001 to \$100,000</td> <td>\$100,001 to \$500,000</td> <td>\$500,001 to \$1 million</td> <td>\$1,000,001 to \$10 million</td> <td>\$10,000,001 to \$50 million</td> <td>\$50,000,001 to \$100 million</td> <td>\$100,000,001 to \$500 million</td> <td>\$500,000,001 to \$1 billion</td> <td>More than \$1 billion</td> </tr> </table> | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1-49 | 50-99 | 100-199 | 200-999 | 1,000-5,000 | 5,001-10,000 | 10,001-25,000 | 25,001-50,000 | 50,001-100,000 | OVER 100,000 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | THIS SPACE IS FOR COURT USE ONLY | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1-49 | 50-99 | 100-199 | 200-999 | 1,000-5,000 | 5,001-10,000 | 10,001-25,000 | 25,001-50,000 | 50,001-100,000 | OVER 100,000 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

B1 (Official Form 1)(4/10)

| | | |
|---|---------------|--|
| Voluntary Petition <i>(This page must be completed and filed in every case)</i> | | Name of Debtor(s): Thompson, Tracy S Taylor, Loryn G |
| All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) | | |
| Location Where Filed: - None - | Case Number: | Date Filed: |
| Location Where Filed: | Case Number: | Date Filed: |
| Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) | | |
| Name of Debtor: - None - | Case Number: | Date Filed: |
| District: | Relationship: | Judge: |
| Exhibit A | | Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). |
| <input type="checkbox"/> Exhibit A is attached and made a part of this petition. | | X /s/ David Krieger, Esq. July 15, 2010 Signature of Attorney for Debtor(s) (Date) David Krieger, Esq. |
| Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No. | | |
| Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input checked="" type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input checked="" type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. | | |
| Information Regarding the Debtor - Venue (Check any applicable box) | | |
| <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. | | |
| Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) | | |
| <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) | | |
| <hr/> (Name of landlord that obtained judgment) | | |
| <hr/> (Address of landlord) | | |
| <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)). | | |

B1 (Official Form 1)(4/10)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Thompson, Tracy S**Taylor, Loryn G****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Tracy S ThompsonSignature of Debtor **Tracy S Thompson****X /s/ Loryn G Taylor**Signature of Joint Debtor **Loryn G Taylor**

Telephone Number (If not represented by attorney)

July 15, 2010

Date

Signature of Attorney***X /s/ David Krieger, Esq.**

Signature of Attorney for Debtor(s)

David Krieger, Esq. 9086

Printed Name of Attorney for Debtor(s)

HAINES & KRIEGER, LLC

Firm Name

**1020 Garces Ave.
Suite 100
Las Vegas, NV 89101**

Address

Email: info@hainesandkrieger.com**(702) 880-5554 Fax: (702) 385-5518**

Telephone Number

July 15, 2010

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person,or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court
District of Nevada

In re Tracy S Thompson
Loryn G Taylor

Debtor(s)

Case No.
Chapter 7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Tracy S Thompson
Tracy S Thompson

Date: July 15, 2010

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court
District of Nevada

In re Tracy S Thompson
Loryn G Taylor

Debtor(s)

Case No.
Chapter

7

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH
CREDIT COUNSELING REQUIREMENT**

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*

2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]* _____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Loryn G Taylor
Loryn G Taylor

Date: July 15, 2010

WARNING: Effective December 1, 2009, the 15-day deadline to file schedules and certain other documents under Bankruptcy Rule 1007(c) is shortened to 14 days. For further information, see note at bottom of page 2

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEVADA**

**NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Many filing deadlines change on December 1, 2009. Of special note, 12 rules that set 15 days to act are amended to require action within 14 days, including Rule 1007(c), filing the initial case papers; Rule 3015(b), filing a chapter 13 plan; Rule 8009(a), filing appellate briefs; and Rules 1019, 1020, 2015, 2015.1, 2016, 4001, 4002, 6004, and 6007.

B 201B (Form 201B) (12/09)

**United States Bankruptcy Court
District of Nevada**

In re Tracy S Thompson
Loryn G TaylorDebtor(s)Case No.
Chapter7

**CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)
UNDER § 342(b) OF THE BANKRUPTCY CODE**

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Tracy S Thompson
Loryn G Taylor

Printed Name(s) of Debtor(s)

Case No. (if known) _____

| | |
|---|----------------------|
| <input checked="" type="checkbox"/> <u>/s/ Tracy S Thompson</u> | July 15, 2010 |
| Signature of Debtor | Date |
| <input checked="" type="checkbox"/> <u>/s/ Loryn G Taylor</u> | July 15, 2010 |
| Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

**United States Bankruptcy Court
District of Nevada**

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors _____,

Chapter _____

7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|---------------------|-------------------|--------------------------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 3 | 12,561.00 | | |
| C - Property Claimed as Exempt | Yes | 2 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 5,205.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | 811.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 55 | | 528,408.65 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 3,473.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 3,543.00 |
| Total Number of Sheets of ALL Schedules | | 69 | | | |
| | | | Total Assets | 12,561.00 | |
| | | | | | Total Liabilities |
| | | | | | 534,424.65 |

Form 6 - Statistical Summary (12/07)

**United States Bankruptcy Court
District of Nevada**

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|------------------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 811.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 22,314.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 23,125.00 |

State the following:

| | |
|---|-----------------|
| Average Income (from Schedule I, Line 16) | 3,473.00 |
| Average Expenses (from Schedule J, Line 18) | 3,543.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 3,211.45 |

State the following:

| | |
|--|-------------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | 0.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 811.00 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | 0.00 |
| 4. Total from Schedule F | 528,408.65 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | 528,408.65 |

In re

**Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|--------------------------------------|---|------------------------------------|--|-------------------------|
|--------------------------------------|---|------------------------------------|--|-------------------------|

None

| | | |
|-------------|-------------|----------------------|
| Sub-Total > | 0.00 | (Total of this page) |
|-------------|-------------|----------------------|

| | |
|---------|-------------|
| Total > | 0.00 |
|---------|-------------|

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|--|------------------|--|---|---|
| 1. Cash on hand | X | | | |
| 2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | Bank of Nevada acct ending 0958 Opened March 2010 | J | 86.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | | Security Deposit for rental of current residence | J | 2,000.00 |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | | Household Goods and Furnishings | J | 3,000.00 |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. Wearing apparel. | | Clothing | J | 1,000.00 |
| 7. Furs and jewelry. | | Watches | J | 100.00 |
| 8. Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | |
| 10. Annuities. Itemize and name each issuer. | X | | | |
| | | | | Sub-Total > (Total of this page) |
| | | | | 6,186.00 |

2 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--------------------------------------|---|---|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | Fidelity IRA acct ending 4629 | J | 50.00 |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | X | | | |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. | | 2010 Tax Refund | J | Unknown |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| Sub-Total > (Total of this page) | | | | 50.00 |

Sheet 1 of 2 continuation sheets attached
to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|---|---|---|
| 22. Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories. | | 1998 Ford Explorer aprox 200000 miles owned outright | J | 800.00 |
| | | 2001 Jaguar S Type aprox 90000 miles | J | 5,525.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |
| 28. Office equipment, furnishings, and supplies. | X | | | |
| 29. Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > **6,325.00**
(Total of this page)
Total > **12,561.00**

(Report also on Summary of Schedules)

Sheet 2 of 2 continuation sheets attached
to the Schedule of Personal Property

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

- 11 U.S.C. §522(b)(2)
 11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds
\$146,450. (Amount subject to adjustment on 4/1/13, and every three years thereafter
with respect to cases commenced on or after the date of adjustment.)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|---|--|----------------------------------|---|
| Husband's Exemptions | | | |
| Checking, Savings, or Other Financial Accounts, Certificates of Deposit | | | |
| Bank of Nevada acct ending 0958 Opened March 2010 | Nev. Rev. Stat. § 21.090(1)(g) Nev. Rev. Stat. § 21.090(1)(z) | 75% 21.50 | 86.00 |
| Security Deposits with Utilities, Landlords, and Others | | | |
| Security Deposit for rental of current residence | Nev. Rev. Stat. § 21.090(1)(n) | 2,000.00 | 2,000.00 |
| Household Goods and Furnishings | | | |
| Household Goods and Furnishings | Nev. Rev. Stat. § 21.090(1)(b) | 3,000.00 | 3,000.00 |
| Wearing Apparel | | | |
| Clothing | Nev. Rev. Stat. § 21.090(1)(b) | 1,000.00 | 1,000.00 |
| Furs and Jewelry | | | |
| Watches | Nev. Rev. Stat. § 21.090(1)(a) | 100.00 | 100.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans | | | |
| Fidelity IRA acct ending 4629 | Nev. Rev. Stat. § 21.090(1)(r) | 50.00 | 50.00 |
| Other Liquidated Debts Owing Debtor Including Tax Refund | | | |
| 2010 Tax Refund | Nev. Rev. Stat. § 21.090(1)(z) | 978.50 | Unknown |
| Automobiles, Trucks, Trailers, and Other Vehicles | | | |
| 1998 Ford Explorer aprox 200000 miles owned outright | Nev. Rev. Stat. § 21.090(1)(f) | 800.00 | 800.00 |
| 2001 Jaguar S Type aprox 90000 miles | Nev. Rev. Stat. § 21.090(1)(f) | 320.00 | 5,525.00 |

| | | |
|--------|----------|-----------|
| Total: | 8,334.50 | 12,561.00 |
|--------|----------|-----------|

1 continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/10) -- Cont.

In re **Tracy S Thompson,
Loryn G Taylor**, Case No. _____,

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|-------------------------|---|----------------------------------|---|
|-------------------------|---|----------------------------------|---|

Wife's Exemptions**Other Liquidated Debts Owing Debtor Including Tax Refund**

| | | | |
|-----------------|--------------------------------|----------|---------|
| 2010 Tax Refund | Nev. Rev. Stat. § 21.090(1)(z) | 1,000.00 | Unknown |
|-----------------|--------------------------------|----------|---------|

Sheet 1 of 1 continuation sheets attached to the Schedule of Property Claimed as Exempt

Software Copyright (c) 1996-2010 - Best Case Solutions - Evanston, IL - www.bestcase.com

| | | |
|--------|----------|------|
| Total: | 1,000.00 | 0.00 |
|--------|----------|------|

Best Case Bankruptcy

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR H W J C | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | C O N T I N G E N T | | U N L I Q U I D A T E D | D I S P U T E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|------------------------------|------------------------------------|--|--|--------------|--|--------------------------------------|--|---------------------------------|
| | | | | CONTINGENT | UNLIQUIDATED | | | | |
| Account No. xxxxxxxx1009 | | | Opened 1/01/09 Last Active 1/25/10 | | | | | | |
| Mission Financial Svcs P O Box 29049 Santa Ana, CA 92799 | J | | Greater than 910 2001 Jaguar S Type aprox 90000 miles | | | | | | |
| | | | Value \$ 5,525.00 | | | | | 5,205.00 | 0.00 |
| Account No. | | | | | | | | | |
| | | | Value \$ | | | | | | |
| Account No. | | | | | | | | | |
| | | | Value \$ | | | | | | |
| Account No. | | | | | | | | | |
| | | | Value \$ | | | | | | |
| 0 continuation sheets attached | | | | Subtotal (Total of this page) | | | | 5,205.00 | 0.00 |
| | | | | Total (Report on Summary of Schedules) | | | | 5,205.00 | 0.00 |

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

 Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/10) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**
TYPE OF PRIORITY

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM | | | | | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY | AMOUNT ENTITLED TO PRIORITY |
|---|------------------------------------|------------------------------------|--|------------------------|--|--------------------------------------|--------------------------------------|---|---|-----------------------------------|
| | | | | C ON TIN GENT | U N L I Q U I D A T E D | D I S P U T E D | T E R M I T E D | | | |
| Account No. | | | | | | | | | | |
| IRS PO Box 21126 Insolvency Philadelphia, PA 19114-0326 | J | | | | | | | 0.00 | | |
| | | | | | | | | 811.00 | | 811.00 |
| Account No. | | | | | | | | | | |
| | | | | | | | | | | |
| Account No. | | | | | | | | | | |
| | | | | | | | | | | |
| Account No. | | | | | | | | | | |
| | | | | | | | | | | |
| Account No. | | | | | | | | | | |
| | | | | | | | | | | |
| Sheet <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims | | | | | | | | Subtotal (Total of this page) | <u>0.00</u> | <u>811.00</u> |
| | | | | | | | | | | |
| | | | | | | | | Total (Report on Summary of Schedules) | <u>0.00</u> | <u>811.00</u> |
| | | | | | | | | | | |

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Husband, Wife, Joint, or Community | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|----------|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | C | O | N | |
| Account No. 3174 | | | May 2010 Collector for Cedar Anesthesia | | | | |
| AAACP PO Box 2662 Cedar City, UT 84721 | J | | | | | | 1,096.77 |
| Account No. xxxxxx1064 | | | Opened 5/01/09 Collection Attorney Centennial Hills Hospital | | | | |
| Aargon Collection Agency 3025 West Sahara Ave Las Vegas, NV 89102 | J | | | | | | 2,479.00 |
| Account No. xxxxxx8728 | | | Feb 2009 Collector for University of Phoenix | | | | |
| Account Control Technology 6918 Owensmouth Ave PO Box 1489802 NTC2 Canoga Park, CA 91309-8012 | J | | | | | | 1,976.00 |
| Account No. xxxxxx9221 | | | Opened 8/01/07 Last Active 2/16/10 Educational | | | | |
| Acs/wachovia Bank Attn: Wachovia Education Finance Po Box 7057 Utica, NY 13504 | J | | | | | | 4,401.00 |
| 54 continuation sheets attached | | | | Subtotal (Total of this page) | | | 9,952.77 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxxx-xxxx-xxxx-0985 | | July 2009 Collector for Citibank | | | | |
| Advantage Assets II inc 7322 SW Freeway Ste 1600 Houston, TX 77074 | J | | | | | 3,084.86 |
| Account No. xxxxxx9699 | | March 2004 Collector for Washoe Medical Center | | | | |
| Alexandria Vaneck Co LPA 5660 Southwyck Blvd 110 Toledo, OH 43614 | J | | | | | 2,263.95 |
| Account No. xxx8732 | | Oct 2003 Collector for Wells Fargo Bank Creditor Acct 0011-4000-0000-0874-4248-702 | | | | |
| Alliance One PO Box 1963 Southgate, MI 48195-0963 | J | | | | | 4,230.55 |
| Account No. xxxxx4401 | | Opened 7/01/08 Collection Attorney Anesthesia Associates | | | | |
| Allied Collection Serv 3080 S Durango Dr Ste 20 Las Vegas, NV 89117 | J | | | | | 298.00 |
| Account No. | | Feb 2002 Collector for Norwest, as Trustee/CFS MBNA Bank | | | | |
| Allied Interstate Coldata Inc PO Box 711477 Cincinnati, OH 45271-1477 | J | | | | | 0.00 |
| Sheet no. <u>1</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 9,877.36 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. | | | | | | |
| American Asset Recovery PO Box 1346 Roseville, CA 95678-1346 | J | | | | | 297.89 |
| Account No. xx-x0802 | | | | | | |
| American Bureau of Credit Control PO Box 5321 Diamond Bar, CA 91765 | J | June 2007 Collector for Djalil Abadi | | | | 6,960.00 |
| Account No. xxx0819 | | | | | | |
| American Medical Response PO Box 3429 Modesto, CA 95353 | J | Dec 2009 Medical Services | | | | 203.25 |
| Account No. xx0023 | | March 2010 | | | | |
| Andrew Shields 653 N Town Center Dr Las Vegas, NV 89144 | J | | | | | 50.00 |
| Account No. xx9259 | | | | | | |
| Anesthesiologists of Reno 301 S Arlington AVE Reno, NV 89501 | J | Feb 2006 Medical Services | | | | 2,140.00 |
| Sheet no. 2 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 9,651.14 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|--|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. xxxx5434 | J | Apr 2009 Collector for HSBC Card Services Master card 5120 2550 0600 2079 | | | | 792.64 |
| ARM PO Box 129 Thorofare, NJ 08086-0129 | | | | | | |
| Account No. xxx7945 | J | June 2005 Collector for First USA/First Card Mastercard 5413 3751 2010 6675 | | | | 8,905.05 |
| Arrow Financial Services 21031 Network Place Chicago, IL 60678 | | | | | | |
| Account No. xxx9581 | J | Feb 2008 Medical Services | | | | 283.74 |
| ASF Siddiqui, MD, Ltd. PO Box 363159 North Las Vegas, NV 89036 | | | | | | |
| Account No. xx1095 | J | May 2009 School Loan | | | | 2,724.00 |
| Ashford University 400 N Bluff Blvd Clinton, IA 52732 | | | | | | |
| Account No. xxxx4821 | J | Jun 2010 Collector for Target National Bank Acct 9003 6259 8401 90 | | | | 1,080.90 |
| Asset Acceptance LLC PO BOX 2036 Warren, MI 48090 | | | | | | |
| Sheet no. <u>3</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 13,786.33 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxxx5145 | | Aug 2004 Collector for First USA/First Card acct 2019 0000 6962 3677 | | | | 4,147.18 |
| Asset Acceptance LLC PO Box 50800 Phoenix, AZ 85076-0800 | J | March 2010 Collector for Target National Bank Acct 9003 6259 8401 90 | | | | 0.00 |
| Account No. xxxx3003 | | 01 Capital One Installment | | | | |
| Associated Recovery Systems PO Box 463023 Escondido, CA 92046-3023 | J | | | | | 4,931.00 |
| Account No. xxx4752 | H | | | | | |
| Atlantic Crd P O Box 13386 Roanoke, VA 24033 | | | | | | |
| Account No. xxxxxxxxxxxxxxxx & xxx xelow | | June 2005 First USA First Card and 2019-0000-6962-3677, 4678025806695XXXX, CP503 | | | | 18,610.51 |
| Bank of America ATTN Bankruptcy Department PO Box 15298 Wilmington, DE 19850 | J | Apr 2000 for MBNA Credit Card 43130 0282 5400 9991 | | | | 11,000.00 |
| Account No. xxxxxxxxxxx & xxx xelow | | | | | | |
| Bank of America 1100 N King St Wilmington, DE 19884 | J | | | | | |
| Sheet no. <u>4</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 38,688.69 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|----------------------|--------------|------------------|
| | | | | | | |
| Account No. xxxxxxxxxx & xxxxxxxx7184 | | Dec 2009 | | | | |
| Barnfield Pet Hospital 8000 NE Tillamook PO Box 13998 Portland, OR 97213-0998 | J | | | | | 721.05 |
| Account No. XXXXXX-XX-XXX423-2 | | Nov 2007 | | | | |
| Beneficial PO Box 60101 City of Industry, CA 91716-0101 | J | | | | | 6,385.55 |
| Account No. xxxx4535 | | March 2009 Collector for Alpharad Inc Wendall Gibby Acct TAYLOR0069 | | | | |
| Bennett Law 1265 Ft Union Blvd Ste 150 Midvale, UT 84047 | J | | | | | 631.25 |
| Account No. xxxxx xxx x6916 | | Sept 2009 and March 2010 Medical Services | | | | |
| Bone and Joint Specialists 2680 Crimson Canyon Dr Las Vegas, NV 89128 | J | | | | | 1,463.63 |
| Account No. xxxxx xxx x3166 | | Sept 2008 and Dec 2009 Medical Services | | | | |
| Brian Lemper 9811 W Charleston #2-389 Las Vegas, NV 89117 | J | | | | | 805.85 |
| Sheet no. <u>5</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 10,007.33 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxxx6341 | J | Oct 2008 Collector for WAMU Visa 4559 5414 0052 8816 | | | | 861.62 |
| BUREAU OF COLLECTION RECOVERY WELLS FARGO BANK 7575 CORPORATE WAY Eden Prairie, MN 55344 | | | | | | |
| Account No. xxxxxxx & xxx below | J | 2003, 2004, 2008 Collection Attorney Associated Anesthesiologists Accts B1681076, B1 499080, B1 421112, B1 456215 | | | | 400.00 |
| Account No. xxx1546 | J | Opened 4/01/04 Collection Attorney Associated Anesthesiologists | | | | |
| Business & Professiona 816 S Center St Reno, NV 89501 | | | | | | 456.00 |
| Account No. xxx9080 | J | Opened 9/01/04 Collection Attorney Associated Anesthesiologists | | | | |
| Business & Professiona 816 S Center St Reno, NV 89501 | | | | | | 312.00 |
| Account No. xxx1465 | J | Opened 10/01/05 Collection Attorney Reno Radiological Associates | | | | |
| Business & Professiona 816 S Center St Reno, NV 89501 | | | | | | 230.00 |
| Sheet no. <u>6</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 2,259.62 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxx1076 | | Opened 8/01/08 Collection Attorney Associated Anesthesiologists | | | | |
| Business & Professiona 816 S Center St Reno, NV 89501 | J | | | | | 34.00 |
| Account No. xxx xxxxxxx xxx xxx xx4896 | | Dec 2006 Medical Services | | | | |
| CA Emergency Physicians P.O. Box 582663 Ste D-27 Modesto, CA 95358-0046 | J | | | | | 503.00 |
| Account No. x7221 | | Feb 2010 Medical Services | | | | |
| Canyon Gate Medical 2929 N Univeristy Dr Ste 110 Pompano Beach, FL 33065 | J | | | | | 5.31 |
| Account No. xxxxxxxxx8098 | | Opened 9/01/00 Last Active 2/15/08 CreditCard | | | | |
| Cap One Po Box 85520 Richmond, VA 23285 | H | | | | | 5,988.00 |
| Account No. xxxxxxxxx0558 | | Opened 12/15/01 Last Active 2/05/08 CreditCard | | | | |
| Cap One Po Box 85520 Richmond, VA 23285 | H | | | | | 0.00 |
| Sheet no. 7 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 6,530.31 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | T | D | E | |
| Account No. xxxxxxxx4191 | | Opened 6/01/00 Last Active 6/01/02 CreditCard | | | | |
| Cap One Po Box 85520 Richmond, VA 23285 | J | | | | | 0.00 |
| Account No. xxxx0782 | | Mar 2010 Collector for Capital One Mastercard 5903 5926 4306 9277 | | | | |
| Capital Management Services 726 Exchange Street Buffalo, NY 14210 | J | | | | | 0.00 |
| Account No. xxxx xxx xxxx 7908 | | Sep 2008 Collector for WAMU Visa | | | | |
| Capital Management Services 726 Exchange Street Buffalo, NY 14210 | J | | | | | 0.00 |
| Account No. xxxx0782 | | | | | | |
| Capital Managemnet Services, LP 726 Exchange Street, Suite 700 Buffalo, NY 14210 | J | | | | | 0.00 |
| Account No. xxxxxxxxxxxxxxxXXX | | Sept 2008 Visa Credit Card | | | | |
| Capital One PO Box 60024 City Of Industry, CA 91716-0024 | J | | | | | 4,290.83 |
| Sheet no. <u>8</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 4,290.83 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|--|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | E | D | |
| Account No. xxxxx9940 | | Dec 2002 For Onyx Acceptance Corp | | | | |
| Capital One Auto Fiance P.O BOX 60511 City of Industry, CA 91716-0511 | J | | | | | 0.00 |
| Account No. xxxxxxxx4306 | H | Opened 4/01/06 Last Active 3/23/08 NoteLoan | | | | |
| Capital One, N.a. 2730 Liberty Ave Pittsburgh, PA 15222 | | | | | | Unknown |
| Account No. xxx1374 | J | July 2003 Collector for Providian Visa 4031 1316 0046 1451 | | | | |
| Cavalry Portfolio Services PO Box 1030 Hawthorne, NY 10532 | | | | | | 1,974.00 |
| Account No. xxxxxxxx xxx xx7817 | J | Feb 2008 and June 2008 Medical Services | | | | |
| Cedar Anesthesia Group 1954 Fort Union Blvd Ste 118 Salt Lake City, UT 84121-6993 | | | | | | 2,056.77 |
| Account No. see below | J | Oct and Dec 2009 8000741705, 8000846652, 8000849060 Medical Services | | | | |
| Centennial Hills Hospital P.O. Box 31001-0827 Pasadena, CA 91110-0827 | | | | | | 589.05 |
| Sheet no. 9 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 4,619.82 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. x3369 | | Jan 2010 Medical Services | | | | 396.86 |
| Centennial Pain 4454 N Decatur Blvd Las Vegas, NV 89130 | J | | | | | |
| Account No. x0547 | | Dec 2004 Medical Services | | | | 89.70 |
| Center for Outpatient Surgery 343 Elm St Ste 100 Reno, NV 89503-4504 | J | | | | | |
| Account No. xxxx xxxx xxxx 0985 | | July 2009 Collector for Advantage Assets | | | | 3,084.86 |
| CENTRAL CREDIT SERVICES DEPT A PO BOX 15118 Jacksonville, FL 32239-5118 | J | | | | | |
| Account No. xxxx-xxxx-xxxx-7908 | | May 1994 Visa Credit Card | | | | 3,601.59 |
| Chase Bank PO Box 36520 Louisville, KY 40233-6520 | J | | | | | |
| Account No. xx-x3652 | | Oct 1999 Medical Services | | | | 33.00 |
| CHW Medical 4132 S Rainbow Blvd #330 Las Vegas, NV 89103-3106 | J | | | | | |
| Sheet no. 10 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 7,206.01 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. x9308 | | June 2009 Medial Services | | | | |
| CHW Needa Imaging PO Box 60000 File 72938 San Francisco, CA 94160-2938 | J | | | | | 89.41 |
| Account No. xxxxxxxxx0270 | | Opened 3/01/98 Last Active 3/01/10 CreditCard | | | | |
| Citi Po Box 6241 Sioux Falls, SD 57117 | J | | | | | 3,789.00 |
| Account No. xxxx xxxx xxxx 0985 | | Jun 2008 Home Depot Acct | | | | |
| Citi Cards PO Box 689106 Des Moines, IA 50368-9106 | J | | | | | 2,653.92 |
| Account No. xx6498 | | Opened 8/01/08 CollectionAttorney Fremont Emergency Centers | | | | |
| Clark County Collectio 8860 W Sunset Rd Ste 100 Las Vegas, NV 89148 | J | | | | | 406.00 |
| Account No. xx9877 | | Opened 4/01/09 CollectionAttorney Fremont Emergency Centers 229203A | | | | |
| Clark County Collectio 8860 W Sunset Rd Ste 100 Las Vegas, NV 89148 | H | | | | | 226.00 |
| Sheet no. 11 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 7,164.33 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM | |
|---|----------------|---|------------|--------------|----------|-----------------|---------------|
| | | | H | W | J | C | |
| Account No. xx5440 | | Opened 8/01/08 Collection Attorney Fremont Emergency Centers | | | | | |
| Clark County Collectio 8860 W Sunset Rd Ste 100 Las Vegas, NV 89148 | H | | | | | | 70.00 |
| Account No. xx7571, xx9203 | | Aug/Sep 2008 Freemont Emergency Services | | | | | |
| Clark County Collection Service 8860 West Sunset Road Suite 100 Las Vegas, NV 89148 | J | | | | | | 450.00 |
| Account No. xx6780 | | Apr 2010 Collector for Nevada Orthopedic & Spine Acct 687644 | | | | | |
| Clark County Collection Service 8860 West Sunset Road Suite 100 Las Vegas, NV 89148 | J | | | | | | 0.00 |
| Account No. xxx6117 | | Aug 2008 Collector for Citibank Home Depot Acct 6035 3202 4361 0985 | | | | | |
| Client Services 3451 Harry Truman Saint Charles, MO 63301 | J | | | | | | 0.00 |
| Account No. xx-xxxx9105 | | Sept 2008 XM Satellite Radio Acct 1-1157921917 | | | | | |
| Collection Company of America PO Box 567 700 Longwate Drive Norwell, MA 02061 | J | | | | | | 54.34 |
| Sheet no. 12 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | | 574.34 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | T | D | E | |
| Account No. xxx5451 | | May 2010 Collector for Randy Gubler DPM | | | | |
| Credit Bureau 2980 S. Jones Blvd., Suite A Las Vegas, NV 89146 | J | | | | | 64.87 |
| Account No. xx xxxx x1774 | | Dec 2009 Collector for Wachovia Education Finance 590645922 001 1 | | | | |
| Credit Collection Services 501 Bleeker St Utica, NY 13501 | J | | | | | 100.00 |
| Account No. xxx8876 | | Dec 2003 | | | | |
| CSI Card Services PO Box 5180 Simi Valley, CA 93062-5180 | J | | | | | 70.00 |
| Account No. xx0017 | | June 2005 Dental Services | | | | |
| Darryl Azouz DDS 6661 Stanford Ranch Rd Ste D Rocklin, CA 95677 | J | | | | | 467.55 |
| Account No. xx0016 | | July 2008 Medical Services | | | | |
| DBA Anesthesia Associates 129 W. Lake Mead Pkwy B18 Henderson, NV 89015 | J | | | | | 216.00 |
| Sheet no. 13 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 918.42 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------|----------------------|--------------|-----------------|
| | | | T | D | E | |
| Account No. xxxx xxxx xxxx 9785 | | Mar 2003 Collector for Sprint | | | | 165.33 |
| Debt Recovery Solutions, LLC 900 Merchants Concourse Westbury, NY 11590-5114 | J | Opened 1/01/06 Last Active 10/12/07 ChargeAccount | | | | 820.00 |
| Account No. xxxxxxxxxxxx9122 | J | Apr 2004 | | | | 3,958.62 |
| Diners/cbsd Po Box 5113 Englewood, CO 80155 | | Sacramento County | | | | 590.00 |
| Account No. xxxxx1728 | | | | | | |
| Discover PO Box 6103 Carol Stream, IL 60197-6103 | J | | | | | |
| Account No. xxxx0066 | J | | | | | |
| Div Rev Rcvy 10669 Coloma Rd Rancho Cordova, CA 95670 | | | | | | |
| Account No. xxxx0064 | | Sacramento County | | | | 118.00 |
| Div Rev Rcvy 10669 Coloma Rd Rancho Cordova, CA 95670 | J | | | | | |
| Sheet no. <u>14</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 5,651.95 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|------------------|
| | | | T | E | D | |
| Account No. xxxxx7713 | | Jun 2009 Collector for Sprint | | | | 398.36 |
| Diversified Consultants, Inc GLDVC101 PO Box 1022 Wixom, MI 48393-1022 | J | | | | | |
| Account No. xx x0802 | | Jun 2007 Personal Loan | | | | 6,960.00 |
| Djalil Abadi 110 Grandville Apt 301 Los Angeles, CA 90049-4247 | J | | | | | |
| Account No. x5221 | | Sep 2009 Collector for Randy Delcore MD | | | | 8,394.44 |
| Doctors & Merchants Credit 1706 West 200 North PO Box 668 Cedar City, UT 84721 | J | | | | | |
| Account No. xx8234 | | Opened 9/10/09 Last Active 11/22/09 Unsecured | | | | 0.00 |
| Dolr Ln Cent 6122 W Sahara Ave Las Vegas, NV 89146 | J | | | | | |
| Account No. xxxx69-00 | | Feb 1997 Medical Services | | | | 155.00 |
| Dr Mikal Barchenger PO Box 70219 5605 Riggins Ct #101 Reno, NV 89570-0219 | J | | | | | |
| Sheet no. 15 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 15,907.80 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | D | E | |
| Account No. xxxxxxxxxxxx5221 | J | Med1 02 Randy G Delcore Md | | | | 8,512.00 |
| Dr/merch Cdt 1706 W 200 N Cedar City, UT 84720 | | | | | | |
| Account No. xxxxxxxxxxxx5986 | J | Med1 02 Southern Utah Mri | | | | 5,675.00 |
| Dr/merch Cdt 1706 W 200 N Cedar City, UT 84720 | | | | | | |
| Account No. xxxx0554 | J | Jan 2009 Collector for Capital One Visa 4305 7221 0558 8977 | | | | 2,375.64 |
| Encore Receivable Management PO Box 3330 Olathe, KS 66063-3330 | | | | | | |
| Account No. xxxx4636 | J | Dec 2009 Collector for HSBC | | | | 792.64 |
| Encore Receivable Management PO Box 3330 Olathe, KS 66063-3330 | | | | | | |
| Account No. xxxx6088 | H | Opened 12/01/09 Collection Attorney Sprint | | | | 398.00 |
| Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256 | | | | | | |
| Sheet no. <u>16</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 17,753.28 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | E | D | |
| Account No. xxxx xxxx xxxx xx92 76 | | Sep 2006 Collector for Wells Fargo Bank | | | | |
| Enhanced Recovery Corporation 8014 Bayberry Rd. Jacksonville, FL 32256-7412 | J | | | | | 8,595.00 |
| Account No. xx1095 | | May 2009 Collector for Ashford Univ 191095-336 | | | | |
| Enterprise Recovery Systems PO Box 8030 Westchester, IL 60154-8030 | J | | | | | 2,724.00 |
| Account No. xxxx xxx xxxx 7908 | | June 2 2010 Collector for Chase Bank Visa | | | | |
| Equitable Ascent Financial 5 Revere Dr Ste 510 Northbrook, IL 60062-1570 | J | | | | | 3,601.59 |
| Account No. xxx9100 | | Opened 10/01/08 Collection Attorney Alpharad Inc | | | | |
| Express Recovery Svcs 2790 S Decker Lake Dr Salt Lake City, UT 84119 | J | | | | | 631.00 |
| Account No. xxxx-xxxx-xxxx-0522 | | Jan 1997 Credit Card | | | | |
| First Bank of Commerce Box One Wichita, KS 67201 | J | | | | | 3,748.97 |
| Sheet no. <u>17</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 19,300.56 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxx9561 | | Oct 2008 Collector for Centennial Hills Hospital 8000024599 | | | | |
| First Source Healthcare Advantage 7650 Magna Drive Belleville, IL 62223 | J | | | | | 2,447.42 |
| Account No. xxxxxx xxx xx7571 | | April and June 2008 Medical Services | | | | |
| Fremont Emergency PO Box1569 Las Vegas, NV 89125-1569 | J | | | | | 427.08 |
| Account No. xxx1388 | | Med1 02 Radiological Assoc Of Sacram | | | | |
| Fresn Cb Col 757 L Street Fresno, CA 93721 | J | | | | | 164.00 |
| Account No. xxx7154 | | Oct 2006 Collector for Radiologial Assoc of Sacramento | | | | |
| Fresno Credit Bureau 757 L St PO Box 942 Fresno, CA 93714 | J | | | | | 9.30 |
| Account No. See below | | Sep and Oct 2007 152-11289394, 7211026, 152-11285665, 152-11295060 | | | | |
| Gardfield Hospital 200 N 400 E PO Box 389 Panguitch, UT 84759 | J | | | | | 396.47 |
| Sheet no. 18 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 3,444.27 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDATED | DIS PUTED | AMOUNT OF CLAIM |
|---|----------------|---|--|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. xxxxxxxx2238 | H | Opened 12/01/93 Last Active 10/01/08 ChargeAccount | | | | 0.00 |
| Gemb/dillards Po Box 981400 El Paso, TX 79998 | H | June 2010 Collector for Ashford University | | | | 0.00 |
| Account No. xx1095 | J | Tracy Thompson Judgment | | | | |
| General Revenue Corporation 11501 Northlake Dr Cincinnati, OH 45249-1618 | J | Jun 2009 Collector for WAMU Visa 4559 5414 0052 8816 | | | | 886.88 |
| Account No. xxxx1687 | J | Opened 7/01/06 Last Active 5/06/08 ChargeAccount | | | | 1,195.00 |
| Global Credit Collection C 300 International Drive PMB 10015 Buffalo, NY 14221 | H | | | | | |
| Account No. xxxxxxxxxxxxx1576 | | | | | | |
| Goodyearcbsd Po Box 6497 Sioux Falls, SD 57117 | | | | | | |
| Sheet no. <u>19</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 2,081.88 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------|----------------------|--------------|------------------|
| | | | | | | |
| Account No. xxxxx2329 | | Dec 2002 | | | | |
| Grandma's Kitchen PO Box 7266 Pasadena, CA 91109-7366 | J | | | | | 7.84 |
| Account No. xxxxxx/xxxxxx7/N73 | | May 2010 Collector for Las Vegas Radiologh | | | | |
| Grant and Weber 861 Coronado Center Drive Suite 211 Henderson, NV 89052 | J | | | | | 94.43 |
| Account No. xxxxxx/xxxxxx-x/xxx & xxx belo | | 2004 and 2005 WAS001/216971-0/N59 Washoe Medical Center | | | | |
| Grant and Weber 861 Coronado Center Drive Suite 211 Henderson, NV 89052 | J | | | | | 19,700.00 |
| Account No. xx x9249 | | Nov 2009 Medical Services | | | | |
| Grass Valley Radiology PO Box 994032 Redding, CA 96099-4032 | J | | | | | 178.00 |
| Account No. xx-xxx-xxxxx7150 | | Oct 2009 Sheer Cover Acct 46-841-289937150 | | | | |
| Guthy-Renker PO Box 11448 Des Moines, IA 50336-1448 | J | | | | | 127.79 |
| Sheet no. <u>20</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | <u>20,108.06</u> |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxxx xx. xx xxxx xxcept 4 | | Sep 1997 First Natl Bank of Commerce vs. Tracy Thompson | | | | |
| Harper & Harper LTD 529 W 2nd St Reno, NV 89503 | J | | | | | 0.00 |
| Account No. xxxxxxxx8441 | H | Opened 3/01/06 Last Active 2/28/08 CheckCreditOrLineOfCredit | | | | |
| Hfc - Usa Po Box 3425 Buffalo, NY 14240 | | | | | | 8,902.00 |
| Account No. xxx8957 | H | Opened 12/01/08 FactoringCompanyAccount Chase Bank Usa N.A | | | | |
| Hilco Rec 5 Revere Dr Ste 510 Northbrook, IL 60062 | | | | | | 3,602.00 |
| Account No. xxx3194 | H | Opened 12/01/08 FactoringCompanyAccount Chase Bank Usa N.A | | | | |
| Hilco Rec 5 Revere Dr Ste 510 Northbrook, IL 60062 | | | | | | 887.00 |
| Account No. xxxxxxxxxxxxx2079 | H | Opened 9/01/06 Last Active 3/31/08 CreditCard | | | | |
| Hsbc Bank Attn: Bankruptcy Po Box 5253 Carol Stream, IL 60197 | | | | | | 792.00 |
| Sheet no. <u>21</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 14,183.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDATED | DIS PUTED | AMOUNT OF CLAIM |
|---|----------------|---|----------------------------------|------------------|--------------|-----------------|
| | | | T | E | D | |
| Account No. xxxxxxxxxxxx2104 | H | Opened 11/01/01 Last Active 1/01/04 CreditCard | | | | 0.00 |
| Hsbc Bank Attn: Bankruptcy Po Box 5253 Carol Stream, IL 60197 | H | Opened 9/21/06 Last Active 11/14/06 CreditCard | | | | 0.00 |
| Account No. xxxxxxxx0394 | H | Opened 3/01/06 Last Active 3/13/06 Unsecured | | | | 0.00 |
| Hsbc Bank Attn: Bankruptcy Po Box 5213 Carol Stream, IL 60197 | H | May 2008 Collector for Target National Bank TC-ST510-999 | | | | 0.00 |
| Account No. xxxxxx19-51 | J | Sep 2008 Collector for WAMU Visa 4559-5414-0052-8816 | | | | 0.00 |
| I.C. System, Inc. 444 Highway 96 East PO Box 64887 Saint Paul, MN 55164 | J | | | | | 0.00 |
| Account No. xxxxxxxx-xxx-xx1-PR2 | | | | | | |
| I.C. System, Inc. 444 Highway 96 East PO Box 64887 Saint Paul, MN 55164 | | | | | | 0.00 |
| Sheet no. <u>22</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 0.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxxxxxxx6-1-39 | | Dec 2009 Collector for Banfield Pet Hospital | | | | |
| IC System Inc 444 Highway 96 East PO Box 64887 Saint Paul, MN 55164-0887 | J | | | | | 0.00 |
| Account No. xxxx xxx x5630 | | June/July 2008 Medical Services | | | | |
| Integrity Home Health Care501 501 S Rancho Drive D21 Las Vegas Las Vegas, NV 89106-4832 | J | | | | | 210.00 |
| Account No. xxxxxxx0 983 | | Dec 2009 Medical Services | | | | |
| International Medical Alliance 5510 Birdcage St Ste 100 Citrus Heights, CA 95610 | J | | | | | 510.30 |
| Account No. xxx6743 | | Dec 2009 Collector for Captial One Visa 4305 7221 0558 8977 | | | | |
| J.C. Christensen & Asoociates P.O. Box 519 Sauk Rapids, MN 56379 | J | | | | | 0.00 |
| Account No. xx7817 | | Jun 2008 Shawn Knroliss CRNA | | | | |
| Johnson Riddle & Mark LLC PO Box 7811 Sandy, UT 84091-7811 | J | | | | | 960.00 |
| Sheet no. <u>23</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | <u>1,680.30</u> |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. xxxx xx6995 | J | Case 08C-049848 Citibank (South Dakota), NA vs. Loren G Taylor | | | | 0.00 |
| Kaleb Anderson, Esq. Rausch, Sturm, Israel & Hornik, SC 8691 W. Sahara Ave. Ste. 210 Las Vegas, NV 89117 | J | Feb 2010 Dental Services | | | | 373.00 |
| Account No. | J | Dec 2009 Medical Services | | | | 25.52 |
| Lab Corp PO Box 2240 Burlington, NC 27216 | J | Mar 2009 Medical Services | | | | 99.43 |
| Account No. x3232 | J | May 2009 Collector for Wells Fargo 8744248702-B | | | | 0.00 |
| Las Vegas Radiology 7500 Smoke Ranch Rd Las Vegas, NV 89128 | J | | | | | |
| Account No. xxxxxx00-11 | J | | | | | |
| Law Offices of Mitchell N. Kay, P.C. 7 Penn Plaza - 18th Floor New York, NY 10001 | J | | | | | |
| Sheet no. <u>24</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 497.95 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxxxxxxxxxxxxx366-A | | March 2007 Collector for Discover | | | | 0.00 |
| Law Offices of Mitchell N. Kay, P.C. 7 Penn Plaza - 18th Floor New York, NY 10001 | J | June 2010 Collector for Chase Bank Visa 4559 5208 0046 7908 | | | | 0.00 |
| Account No. xxxxx34-10 | | Dec 009 Medical Services | | | | 43.27 |
| Law Offices of Mitchell N. Kay, P.C. 7 Penn Plaza - 18th Floor New York, NY 10001 | J | March 2007 Phone Service | | | | 39.95 |
| Account No. xxxx5505 | | Nov 2009 Collector Goodyear Citibank USA NA 6035 5101 2449 1576 | | | | 0.00 |
| Lingo Phone Services 7901 Jones Branch Dr Mc Lean, VA 22102 | J | | | | | |
| Account No. xxxx4769 | | | | | | |
| LTD Financial Services 7322 Souhtwest Freeway, Suite 1600 Houston, TX 77074 | J | | | | | |
| Sheet no. <u>25</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 83.22 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------------|---|----------------------------------|--------------|----------|------------------|
| | | | C | U | D | |
| Account No. xxxxxxxxxxxxx0985 | H | Opened 6/01/09 CollectionAttorney Advantage Assets li Inc. | | | | |
| Ltd Financial Svcs Lp 7322 Southwest Fwy Ste 1 Houston, TX 77074 | H | | | | | 3,084.00 |
| Account No. xxxxxxxxxxxxx8977 | H | Opened 10/01/08 FactoringCompanyAccount Capital One | | | | |
| Lvnv Funding Llc Po Box 740281 Houston, TX 77274 | H | | | | | 2,930.00 |
| Account No. x1194 | J | Oct 2009 Medical Services | | | | |
| Mark Kabins, MD 501 S Rancho Drive Las Vegas, NV 89146 | J | | | | | 4,645.65 |
| Account No. xxxxxx & xx0146 | J | Jun 2003 NV Wet LA | | | | |
| Marlin PO Box 8592 Philadelphia, PA 19101 | J | | | | | 120.00 |
| Account No. xxxxxxxxxxxx xxx xxx xelow | J | Feb 2002 and Feb 2006 4313028254009991 | | | | |
| MBNA 1100 N King St Wilmington, DE 19884 | J | | | | | 11,438.20 |
| Sheet no. <u>26</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | <u>22,217.85</u> |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|------------------|
| | | | | | | |
| Account No. xx5018 | | Dec 2009 Medical Services | | | | |
| Medequip 32261 Camino Capistrano 101 San Juan Capistrano, CA 92675 | J | | | | | 42.46 |
| Account No. xxxxxxxxx0190 | | April 1994 Visa Credit Card | | | | |
| Mellon Bank 10th & Market St Wilmington, DE 19801 | J | | | | | 4,442.00 |
| Account No. xxxxxxxxx0190 | | Opened 4/01/94 Last Active 4/01/02 CreditCard | | | | |
| Mellon Bank De 4500 New Linden Hill Rd Wilmington, DE 19808 | H | | | | | Unknown |
| Account No. xxxxxxxx4693 | | July 2007 Portfolio Recovery Associates 4678025806695 | | | | |
| Merchants Credit Guide 223 W. Jackson Blvd Chicago, IL 60606 | J | | | | | 5,558.28 |
| Account No. xx-xx-xxxxxxxx & xx8427 | | April 1999 and May 2003 Medical Services | | | | |
| Mercy American River Hospital 4747 Engle Rd Carmichael, CA 95608 | J | | | | | 4,166.19 |
| Sheet no. 27 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 14,208.93 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxx3538 | | April 1999 Medical Services | | | | |
| Mercy Healthcare Sacramento PO Box 60000 San Francisco, CA 94160-3398 | J | | | | | 2,780.58 |
| Account No. xxxxx1728 | | March 2004 549838390 | | | | |
| Midland Credit Management, Inc Dept 8870 Los Angeles, CA 90084-8870 | J | | | | | 0.00 |
| Account No. xxxxxxxx0056 | | Opened 1/22/93 Last Active 3/07/05 ChargeAccount | | | | |
| Mil Star Attention: Bankruptcy Po Box 6250 Madison, WI 53716 | H | | | | | 0.00 |
| Account No. x9064 | | April 2010 Cash Loan | | | | |
| Money Tree PO Box 58363 Seattle, WA 98138 | J | | | | | 724.00 |
| Account No. xxxx8269 | | Aug 2009 Collector for Capital One 4305 7221 0558 8977 | | | | |
| National Action Financial Services 165 Lawrence Bell Dr., Suite 100 PO Box 9027 Buffalo, NY 14231-9027 | J | | | | | 0.00 |
| Sheet no. <u>28</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 3,504.58 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. xxxxxxx & xxx4495 | | Opened 11/01/06 Collection Attorney Reno Orthopaedic Clinic | | | | 1,238.00 |
| National Business Fact 969 Mica Dr Carson City, NV 89705 | J | | | | | |
| Account No. xxxxxxxxxxxx & xxxxxx8116 | | Jan 2007 Collector for Renown Regional Med Ctr | | | | 21,000.00 |
| NATIONAL PROFESSIONAL SVCS 2235 E. FLAMINGO RD STE 405 Las Vegas, NV 89119-5197 | J | | | | | |
| Account No. | | 035064C0147817 864299276 CX SERV Wells Fargo Bank | | | | 8,595.50 |
| National Revenue Corporation 4000 E 5th Ave Columbus, OH 43219 | J | | | | | |
| Account No. xxxx xxxx xxxx 1335 | | July 2009 | | | | 9,336.64 |
| Nations Bank aka Bank of America PO Box 31019 Tampa, FL 33631 | J | | | | | |
| Account No. xxxx xxxx xxxx 9277 | | June 2009 Collector for Atlantic Credit | | | | 4,930.62 |
| Nations Recovery Center, Inc. 6491 Peachtree Industrial Blvd. Atlanta, GA 30360 | J | | | | | |
| Sheet no. <u>29</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 45,100.76 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|------------|--------------|----------|--|
| | | | T | D | E | |
| Account No. xxx2356 | | Opened 2/01/09 Collection Attorney Southern Hills Medical Center | | | | 689.00 |
| NCO Po Box 790113 St. Louis, MO 63149 | J | | | | | |
| Account No. xxxx7406 | | Opened 7/01/09 Collection Attorney Southern Hills Medical Center | | | | 534.00 |
| NCO Po Box 790113 St. Louis, MO 63149 | H | | | | | |
| Account No. xxxx1822 | | Opened 11/01/09 Collection Attorney Southern Hills Medical Center | | | | 280.00 |
| NCO Po Box 790113 St. Louis, MO 63149 | H | | | | | |
| Account No. | | | | | | |
| NCO | J | | | | | 0.00 |
| Account No. xx2530 | | Dec 2008 Collector The Home Depot 6035 3202 4361 0985 | | | | 0.00 |
| NCO Financial 507 Prudential Rd Horsham, PA 19044 | J | | | | | |
| Sheet no. 30 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 1,503.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxxxxxxx9602 | | Oct 2008 Collector for Southern Hills Med Ctr | | | | 0.00 |
| NCO Financial 10540 White Rock Rd Ste 250 Rancho Cordova, CA 95670 | J | June 2010 Collector for Emcare Center Emergency Phys 7172687 3011422 | | | | 0.00 |
| Account No. xx9HEH | | Sept 2009 Collector for Citibank 6035 5101 2449 1576 | | | | 0.00 |
| NCO Financial 507 Prudential Road Horsham, PA 19044 | J | Aug 2009 Collector for Target National Bank 90036259840190 | | | | 0.00 |
| Account No. xx1410 | | March 2002 Collector for Nations Bank 4746810012521335 | | | | 0.00 |
| NCO Financial 507 Prudential Road Horsham, PA 19044 | J | | | | | |
| Account No. xx4GB4 | | | | | | |
| NCO Financial 507 Prudential Road Horsham, PA 19044 | J | | | | | |
| Account No. xx8893 | | | | | | |
| NCO Financial PO Box 41448 Philadelphia, PA 19101-1448 | J | | | | | |
| Sheet no. <u>31</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 0.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xx1522 | | May 2009 Collector for HSBC Card Services 5120225006002079 | | | | 0.00 |
| NCO Financial PO Box 15372 Wilmington, DE 19850-5372 | J | March 2009 Collector for Shadow Emergency Physicians 8000024599 2162599 | | | | 0.00 |
| Account No. xx59LK | | March 2009 Collector for Southern Hills Hospital | | | | |
| NCO Financial PO Box 17095 Wilmington, DE 19850-7095 | J | | | | | 0.00 |
| Account No. xxxxxxxx2043 | | March 2007 Collector for Sutter Roseville Med Ctr | | | | |
| NCO Financial 5100 Peachtree Industrial Blvd Ste L Norcross, GA 30071 | J | Opened 11/01/09 Collection Attorney Sunrise Mountain View Hospital | | | | 0.00 |
| Account No. xxxxxxxx/xxxx7429 | J | | | | | 0.00 |
| NCO Financial System Inc PO Box 13727 Sacramento, CA 95853 | | | | | | |
| Account No. xxxx7450 | | | | | | |
| NCO Financial Systems 507 Prudential Road Horsham, PA 19044 | J | | | | | 337.00 |
| Sheet no. <u>32</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 337.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | E | D | |
| Account No. xxxx0002 NCO Financial Systems 10540 White Rock Rd Suite 250 Rancho Cordova, CA 95670 | J | Dec 2009 Collector for Southwest AMR | | | | 0.00 |
| Account No. xxxx8834 NCO Financial Systems 10540 White Rock Rd Suite 250 Rancho Cordova, CA 95670 | J | Jun 2009 Collector for Southern Hills Hospital | | | | 0.00 |
| Account No. xx6813 NCO Financial Systems Inc. 507 Prudential Road Horsham, PA 19044 | J | May 2008 Collector for Citibank 5528 3200 2244 9122 | | | | 0.00 |
| Account No. xxxx1341 Nco- Medclr Po Box 8547 Philadelphia, PA 19101 | J | Opened 3/01/09 Factoring Company Account Med1 02 Shadow Emergency Physicians | | | | 72.00 |
| Account No. xxxxxxxxxxxxxxxx0000 Nevada Energy PO Box 30086 Reno, NV 89520-3086 | J | Apr 1998 Utility | | | | 163.24 |
| Sheet no. <u>33</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | <u>235.24</u> |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | E | D | |
| Account No. xx6780 | | Feb 2010 Medical Services | | | | 62.02 |
| Nevada Orthopedic & Spine PO Box 36550 Las Vegas, NV 89133 | J | Ronald Blaemore et al vs. Tracy Scott Thompson | | | | 0.00 |
| Account No. xx: xxxx xxxx-x4740 | | March 2007 Collector for PG & E Utility 28850873283 | | | | 0.00 |
| NIk Walters Esq 711 Jones St Reno, NV 89503 | J | | | | | |
| Account No. xxxxxxxx3283 | | Opened 7/01/01 Last Active 12/01/02 Automobile | | | | 0.00 |
| North Shore Agency 751 Summa Avenue Westbury, NY 11590 | J | | | | | |
| Account No. xxxxx9940 | | Nov 2008 Credit Card | | | | 0.00 |
| Onyx Accep 151 N Sunrise Ave Ste 912 Roseville, CA 95661-2929 | H | | | | | |
| Account No. xxxx-xxxx-xxxx-2079 | | | | | | 792.64 |
| Orchard Bank/ HSBC PO Box 60102 City Of Industry, CA 91716-0102 | J | | | | | |
| Sheet no. 34 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 854.66 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | E | D | |
| Account No. xxxxxxxxxxxx8317 | J | Opened 3/01/08 Collection Attorney Garfield Memorial Hosp/Clinic 1248317 | | | | 3,117.00 |
| Outsource Receivables Attn: Bankruptcy Dept Po Box 166 Ogden, UT 84402 | | | | | | |
| Account No. xxx5530 | J | Feb 2003 Collector for Wells Fargo Bank | | | | 0.00 |
| Pacific Coast Collections 4797 Ruffner St San Diego, CA 92111-1519 | | | | | | |
| Account No. xxxxxxx3283 | J | Sept 2007 Utility | | | | 405.62 |
| Pacific Gas and Electric Company Barbara Green, Bankruptcy Unit PO Box 8329 Stockton, CA 95208 | | | | | | |
| Account No. x6916 | J | May 2010 Collector for Michael Elkanich | | | | 0.00 |
| Plus Four Inc. PO BOX 95846 Las Vegas, NV 89193 | | | | | | |
| Account No. xxxx3667 | J | May 2009 Collector for Household Finance Corp 2179 0000 9584 41 | | | | 0.00 |
| Professional Bureau of Coll of Maryland Dept 11196 PO Box 1259 Oaks, PA 19456 | | | | | | |
| Sheet no. <u>35</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 3,522.62 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. xxxxxxxxx xxx2599 | | March 2010 Collector for Shadow Emergency Physicians 9479885 | | | | 0.00 |
| Professional Recovery Consultants 2700 Meridian Parkway Ste 200 Durham, NC 27713-2204 | J | Opened 12/01/07 Collection Attorney St. Mary S Regional Medical Ce | | | | 631.00 |
| Account No. xxxx8724 | | July 2003 | | | | 1,974.26 |
| Progressive Mgmt Syste 1521 W Cameron Ave Fl 1 West Covina, CA 91790 | J | Apr 1997 Medical Services | | | | 84.00 |
| Account No. xxxx-xxxx-xxxx-1451 | | Sept 2004 Collector for Cox Communications -X | | | | 0.00 |
| Providian/Washington Mutual P.O. Box 660487 Dallas, TX 75266 | J | | | | | |
| Account No. xxxxxx22-00 | | | | | | |
| Pyramid Health Center 2281 Pyramid Health Center Sparks, NV 89431 | J | | | | | |
| Account No. xxxx-x0655 | | | | | | |
| Quantum Collection 3224 Civic Center Dr. North Las Vegas, NV 89036 | J | | | | | |
| Sheet no. <u>36</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 2,689.26 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxxxx4034 | | May 2006 Medical Services | | | | |
| Radiology Associates of Sac SAC MED GROP INC PO Box 160008 Sacramento, CA 95816-0008 | J | | | | | 9.30 |
| Account No. x9699 | | Aug 2008 Medical Services | | | | |
| Randy Delcore, MD 1335 N Northfield Rd 200 Cedar City, UT 84720 | J | | | | | 5,589.00 |
| Account No. xxx5451 | | July 2009 Medical Services | | | | |
| Randy Gubler, MD 653 town Center Dr 203 Las Vegas, NV 89144 | J | | | | | 64.54 |
| Account No. xxxxxx & xx6284 | | June 2008 & Sept 2009 Collector for Citibank 5528320022449122 & 6035320243610985 | | | | |
| Rausch, Strum, Israel & Hornik 8691 W Sahara Ave Suite 210 Las Vegas, NV 89117 | J | | | | | 0.00 |
| Account No. xxxx3516 | | Opened 12/01/08 Collection Attorney Sprint | | | | |
| Receivables Performanc P.o. Box 768 Bothell, WA 98041 | J | | | | | 398.00 |
| Sheet no. 37 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 6,060.84 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. xxxx8758 | | May 2009 Collector for Capital One 4305722105588977 | | | | 0.00 |
| Redline Recovery Services 2350 North Forest Road Ste. 31B Getzville, NY 14068 | J | | | | | |
| Account No. xx2901 | | May 2008 Collector for Univ of Phoenix | | | | 0.00 |
| Reliant Capital Solution LLC 750 Cross Pointe Rd Ste G Columbus, OH 43230 | J | | | | | |
| Account No. xxxxxx & xxxxxx8116 | | July 2003 & Sep 2004 Collector for Washoe Med Ctr 1100913019 | | | | 0.00 |
| Remittance Assistance Corp PO Box 20849 Reno, NV 89515-0849 | J | | | | | |
| Account No. see below | | 2003 - 2007 Medical Services for 1190591, 8441, 1421112, 826356 | | | | 13,700.00 |
| Reno Orthopaedic 555 N Arlington Ave Reno, NV 89503 | J | | | | | |
| Account No. xxxxxx/xxx1112 | | 2003-2006 Medical Services | | | | 243.45 |
| Reno Radiological Associates 5250 Neil Rd Ste 103 PO Box 30034 Reno, NV 89520-3034 | J | | | | | |
| Sheet no. <u>38</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 13,943.45 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|------------|--------------|----------|---|
| | | | | | | |
| Account No. xxxxxx6127 | | July 2006 Medical Services | | | | 39,360.04 |
| Renown Health PO Box 3006 Reno, NV 89520-3006 | J | | | | | |
| Account No. xx5497 | | Jun 2004 collector for Sierra Nevada Memorial Hosp | | | | 0.00 |
| Retailers Credit Association 830 Zion St Nevada City, CA 95959 | J | | | | | |
| Account No. xx8427 | | May 2003 Collector for Mercy American River Hosp | | | | 0.00 |
| Retailers Credit Association 830 Zion St Nevada City, CA 95959 | J | | | | | |
| Account No. xxxxxx8116 | | Oct 2006 Collector for Renown Reg Med Ctr/GW 681374-6vWAS016 DP2 | | | | 0.00 |
| RevCare Incorporated PO Box 2309 Cypress, CA 90630-1809 | J | | | | | |
| Account No. xxxxxx9699 | | Mar 2006 Collector for Washoe Med Ctr 667884-2 WAS001 161 | | | | 0.00 |
| RevCare Incorporated PO Box 2309 Cypress, CA 90630-1809 | J | | | | | |
| Sheet no. 39 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | Subtotal (Total of this page) 39,360.04 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxxxxx3019 | | Oct 2006 Collector for Renown Reg Med Ctr 680958-0 WAS016 DP 2 | | | | 0.00 |
| RevCare Incorporated PO Box 2309 Cypress, CA 90630-1809 | J | Feb 2006 Collector for MBNA Bank 4313028254009991 | | | | 0.00 |
| Account No. xxxxxx9937 | J | Jan 2010 Collector for Wells Fargo 8744248702 | | | | 0.00 |
| RJM 575 Underhill Suite 224 Syosset, NY 11791 | J | Opened 2/01/08 Factoring Company Account History Book Club | | | | 56.00 |
| Account No. xxxxxx6387 | J | Opened 11/01/02 Last Active 6/14/05 Automobile | | | | Unknown |
| RJM Acq Llc 575 Underhill Blvd Ste 2 Syosset, NY 11791 | H | | | | | |
| Account No. xxxxxxxxxxxx0001 | | | Subtotal (Total of this page) | | | 56.00 |
| Roadloans.com Attn: Bankruptcy 5201 Rufe Snow Dr Ste 400 North Richland Hills, TX 76180 | | | | | | |

Sheet no. 40 of 54 sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|------------------|
| | | | T | E | D | |
| Account No. xx0029 | | Dec 2007 Dental Services | | | | 297.89 |
| Rocklin Dental 5800 Stanford N Ranch Rd # 900 Rocklin, CA 95765 | J | | | | | |
| Account No. xxx3573 | | Sept 2007 | | | | 10,389.33 |
| Ronald and Nancy Blakemore 10475 Double R Blvd PO Box 11400 Reno, NV 89510-1400 | J | | | | | |
| Account No. xxxx-1075 | | Jan/Feb 2006 Medical Services | | | | 2,840.87 |
| Ronald Sherrod, DC 2221 sunset Blvd #103 Rocklin, CA 95765 | J | | | | | |
| Account No. xxxx3194 | | Dec 2008 Collector for Spring 335447713 | | | | 0.00 |
| RPM Receivable Performance 20816 44th Ave Lynnwood, WA 98036 | J | | | | | |
| Account No. x-xxxxx1031 | | April 1999 Medical Services | | | | 163.78 |
| Sacramento Radiology PO Box 276010 Sacramento, CA 95827-6010 | J | | | | | |
| Sheet no. 41 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 13,691.87 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|------------|--------------|----------|-----------------|
| | | | | | | |
| Account No. xxx xxxx x xccts | | Oct - Dec 2006 Medical Services VSD8000849060/VSD8000741705/VSD80008466 52 | | | | |
| Shadow Emergency Physicians PO Box 13917 Philadelphia, PA 19101 | J | March 2010 | | | | 96.77 |
| Account No. xxxxx7150 | J | June 15, 2010 Dental Services | | | | 127.79 |
| Sheer Cover PO Box 11448 Des Moines, IA 50336-1448 | | | | | | |
| Account No. xx0023 | J | June 15, 2010 Dental Services | | | | 50.00 |
| Shields Family Dentistry 653 N Town Center Dr Las Vegas, NV 89144-0514 | | | | | | |
| Account No. xx0023 | J | Nov 2002 Medical Services | | | | 50.00 |
| Shields Family Dentistry 653 N Town Center Dr Las Vegas, NV 89144-0514 | | | | | | |
| Account No. xxxxxxxx5451 | J | | | | | 2,601.75 |
| Sierra Nevada PO Box 60000 San Francisco, CA 94160-3429 | | | | | | |
| Sheet no. <u>42</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 2,926.31 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | T | D | E | |
| Account No. xxxx5505 | | March 2007 Collector for Lingo | | | | 0.00 |
| SKO BRENNER AMERICAN INC 40 DANIEL ST Farmingdale, NY 11735 | J | Dec 2009 Collector for CSI Card Service Intl | | | | 0.00 |
| Account No. x xxx8876 | J | March 2010 Collector for Sheer Cover | | | | 0.00 |
| SKO Brenner American, Inc. PO Box 9320 Baldwin, NY 11510 | J | April 2009 Medical Services | | | | 46.87 |
| Account No. xxxxx7150 | J | Nov 2008 Medical Services | | | | 3,848.00 |
| SKO Brenner American, Inc. 40 Daniel St PO Box 230 Farmingdale, NY 11735-0230 | | | | | | |
| Account No. 2696 | | | | | | |
| Sonoran Medical Imaging 7455 W. Washington Ave. #120 Las Vegas, NV 89128 | | | | | | |
| Account No. xx699B | | | | | | |
| Southern Utah MRI 1335 N Northfield Rd 100 Cedar City, UT 84720 | | | | | | |
| Sheet no. <u>43</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 3,894.87 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | E | D | |
| Account No. xxxxx8743 | | Dec 2009 Medical Services | | | | |
| Spring Valley Medical Center 5400 S. Rainbow Blvd Las Vegas, NV 89118 | J | | | | | 1,296.36 |
| Account No. xxxx-xxxx-xxxx-9785 | | Mar 2003 Phone Service | | | | |
| Sprint PO Box 54977 Los Angeles, CA 90054-0977 | J | | | | | 165.33 |
| Account No. | | Judgment against Tracy S Thompson | | | | |
| Statefarm Insurance Company One State Farm Plaza Bloomington, IL 61710 | J | | | | | 0.00 |
| Account No. x2792 | | Dec 2009 | | | | |
| Steinberg Diagnostic Med Imaging PO Box 36900 Las Vegas, NV 89133-6900 | J | | | | | 5.72 |
| Account No. xxxxxxxxxxxx4988 | | Opened 5/01/09 Collection Attorney American Mercury Ret Nva 2264988 | | | | |
| Stuart Allan & Assoc 5447 E 5th St Ste 110 Tucson, AZ 85711 | H | | | | | 111.00 |
| Sheet no. 44 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 1,578.41 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxx2687 | | Dec 2009 Medical Services | | | | |
| Summerlin Hospital P.O. Box 31001-0827 Pasadena, CA 91110-0827 | J | | | | | 1,022.00 |
| Account No. xxxx0001 | | July 2009 Medical Services | | | | |
| Sun City Foot Care 653 Town Center Dr Las Vegas, NV 89144-0516 | J | | | | | 64.87 |
| Account No. xxx7916, xxx0579 | | Aug 2007 and Dec 2007 Medical Services | | | | |
| Sutter Medical Foundation PO Box 255228 Sacramento, CA 95865-5228 | J | | | | | 543.58 |
| Account No. see below | | Apr 2006 and Dec 2006, Dec 2007 39601067,4028807-8, 40279564 | | | | |
| Sutter Roseville Medical Center PO Box 160100 Sacramento, CA 95816 | J | | | | | 1,855.71 |
| Account No. xxxx1067 | | July 2007 Medical Services | | | | |
| Sutter Roseville Medical Center PO Box 13727 Sacramento, CA 95853 | J | | | | | 165.57 |
| Sheet no. 45 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 3,651.73 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|--------------|----------|-----------------|
| | | | T | I | D | |
| Account No. x2829 | | Nov 2002 Medical Services | | | | 232.00 |
| Swope Medical Group PO Box 805 Nevada City, CA 95959 | J | | | | | |
| Account No. x6259 | | Opened 5/01/06 Last Active 2/18/08 ChargeAccount | | | | 818.00 |
| Target Po Box 9475 Minneapolis, MN 55440 | H | | | | | |
| Account No. xxxxxxxxxxxxx5339 | | Opened 10/01/05 Last Active 2/13/06 CollectionAttorney Serenity Dental | | | | 0.00 |
| Trojan Professional Se 4410 Cerritos Ave Los Alamitos, CA 90720 | J | | | | | |
| Account No. xxx4521 | | Jan 1999 Medical Services | | | | 2,807.50 |
| UC Davis Medical Center 2315 Stockton Blvd Sacramento, CA 95817 | J | | | | | |
| Account No. xxxx5212 | | Jan 1999 Medical Services | | | | 354.00 |
| UC Davis Medical Center File # 81067, Box 60000 San Francisco, CA 94160 | J | | | | | |
| Sheet no. 46 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 4,211.50 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | T | D | E | |
| Account No. xxxx5594 UMC P.O. Box 749556 Los Angeles, CA 90074-9556 | J | Dec 2009 and Jan 2010 Medical Services | | | | 54,244.68 |
| Account No. xxxx4046 United Collect Bur Inc 5620 Southwyck Blvd Ste Toledo, OH 43614 | J | Opened 2/01/07 Collection Attorney Renown Health | | | | 0.00 |
| Account No. xxxxxxxxxx & xxxx4874 United Collection 5620 Southwyck Boulevard Suite 260 Toledo, OH 43614 | J | March 2004 & May 2006 Collector for Washoe Health System 2101509699 & 1101310322 | | | | 0.00 |
| Account No. xxxxxxx6127 United Collection Bureau 5620 Southwyck Boulevard Suite 206 Toledo, OH 43614 | J | July 2006 Collector for Renown Health | | | | 0.00 |
| Account No. xxx2860 United Recovery System /Home Depot PO Box 722910 Houston, TX 77272 | J | Feb 2008 Collector for Citibank 5528320022449122 | | | | 0.00 |
| Sheet no. <u>47</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 54,244.68 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxxx7635 | | Jul 2008 Collector for HSBC Bank 5120 2550 0600 2079 | | | | 0.00 |
| United Recovery Systems PO Box 722929 Houston, TX 77272 | J | Opened 4/01/06 Unsecured | | | | 1,977.00 |
| Account No. xxxxxx8728 | J | Opened 7/01/95 Last Active 4/01/02 CreditCard | | | | Unknown |
| University Of Phoenix 4615 E Elwood St Fl 3 Phoenix, AZ 85040 | J | Oct 2008 Medical Services | | | | 1,884.33 |
| Account No. xxxxxxxx2513 | J | Oct 2007 & June 2008 Medical Services | | | | 3,669.72 |
| Unvl/citi Po Box 6241 Sioux Falls, SD 57117 | | | | | | |
| Account No. xxxxxxxx5913 | | | | | | |
| Valley View Medical 4646 W Lake Park Blvd Salt Lake City, UT 84130-0191 | | | | | | |
| Account No. xxx-xxxxxxxx & xxx-xxxxx3120 | | | | | | |
| Valley View Medical 1303 N Main Cedar City, UT 84720 | | | | | | |
| Sheet no. <u>48</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | <u>7,531.05</u> |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDATED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------|------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxxx-xxxx-xxxx-7908 | | Jun 2008 Collector for Washington Mutual Visa | | | | 0.00 |
| Van Ru Credit Corporation 1350 E Touchy Ave Suite 100E Des Plaines, IL 60018-3307 | J | | | | | |
| Account No. xxxx5749 | | Oct 2009 Collector for Chase Bank Visa 4559520800467908 | | | | 0.00 |
| Vital Recovery Services, Inc. PO Box 923748 Norcross, GA 30010-3748 | J | | | | | |
| Account No. xxxx8450 | | Opened 8/10/07 Last Active 7/07/08 Educational | | | | 0.00 |
| Wach Ed Fin Notifications go to servicer of loan not | J | | | | | |
| Account No. xxxx8212 | | Opened 8/13/07 Last Active 9/08/08 Educational | | | | 0.00 |
| Wach Ed Fin Notifications go to servicer of loan not | J | | | | | |
| Account No. xxxx1009 | | Opened 6/03/08 Last Active 9/08/08 Educational | | | | 0.00 |
| Wach Ed Fin Notifications go to servicer of loan not | J | | | | | |
| Sheet no. <u>49</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 0.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------------------------|----------------------|--------------|------------------|
| | | | | | | |
| Account No. xxxx4443 | | Opened 5/15/06 Last Active 9/08/08 Educational | | | | |
| Wach Ed Fin Notifications go to servicer of loan not | J | | | | | 0.00 |
| Account No. xxxx8238 | | Opened 8/01/07 Last Active 8/01/08 Educational | | | | |
| Wach Ed Fin Notifications go to servicer of loan not | J | | | | | Unknown |
| Account No. xxxx4456 | | Opened 5/01/06 Last Active 8/01/08 Educational | | | | |
| Wach Ed Fin Notifications go to servicer of loan not | J | | | | | Unknown |
| Account No. xxxxxx9223 | | Opened 5/01/06 Last Active 10/09/09 Educational | | | | |
| Wachovia/acs 501 Bleecker St Utica, NY 13501 | J | | | | | 7,368.00 |
| Account No. xxxxxx9224 | | Opened 8/01/07 Last Active 10/09/09 Educational | | | | |
| Wachovia/acs 501 Bleecker St Utica, NY 13501 | J | | | | | 5,832.00 |
| Sheet no. <u>50</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | Subtotal (Total of this page) | | | 13,200.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONT INGENT | UN LIQUIDAT ED | DIS PUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|----------------|----------------------|--------------|-----------------|
| | | | | | | |
| Account No. xxxxxx9222 | | Opened 6/01/08 Last Active 10/09/09 Educational | | | | |
| Wachovia/acs 501 Bleecker St Utica, NY 13501 | J | | | | | 1,989.00 |
| Account No. xxxxxx8816 | | Opened 6/18/01 Last Active 12/18/08 CreditCard | | | | |
| Washington Mutual / Providian Attn: Bankruptcy Dept. Po Box 15919 Wilmington, DE 19850 | J | | | | | 0.00 |
| Account No. xxxxxx7908 | | Opened 2/11/02 Last Active 12/15/08 CreditCard | | | | |
| Washington Mutual / Providian Attn: Bankruptcy Dept. Po Box 15919 Wilmington, DE 19850 | H | | | | | 0.00 |
| Account No. xxxxxx/xxxxxx-1/N77 | | May 2005 Medical Services | | | | |
| Washoe Medical Center 861 Coronado Center Dr Ste 211 Henderson, NV 89052 | J | | | | | 2,815.07 |
| Account No. see below | | Dec 04, Feb 06, Mar 06, May 06 1101310322, 2101920011, 2101509699 | | | | |
| Washoe Medical Center File 50000 Los Angeles, CA 90074-0001 | J | | | | | 4,090.19 |
| Sheet no. <u>51</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 8,894.26 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|------------|--------------|----------|------------------|
| | | | | | | |
| Account No. xxxxxxxxxx & xxxx8116 | | Nov 2002 & Jan 2004 Medical Services | | | | 21,094.78 |
| Washoe Medical Center PO Box 30006 Reno, NV 89520-3006 | J | Jan 2010 & Dec 2002 | | | | 12,826.05 |
| Account No. xxxxxxxxxx & xxxx9276 | J | Oct 2007 Medical Services | | | | 265.00 |
| Wells Fargo Bank PO Box 3696 MAC:P6053-021 Portland, OR 97208-3696 | | Feb & Oct 2009 Collector for Southern Hills Med Ctr 20311451822 & xxxx2356 | | | | 0.00 |
| Account No. xxxxxxxx0069 | J | March 2009 Collector for Southern Hills Hosp 3991822 | | | | 0.00 |
| Wendell Gibby, MD 280 W Riverpark Dr Ste 100 Provo, UT 84604-5765 | | | | | | |
| Account No. xxxxxxxxxxxx & xxxxxxxx9602 | J | | | | | |
| West Asset Management 2703 North Highway 75 Sherman, TX 75090 | | | | | | |
| Account No. xxx1822 | J | | | | | |
| West Asset Management 2703 North Highway 75 Sherman, TX 75090 | | | | | | |
| Sheet no. <u>52</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 34,185.83 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR H W J C | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|------------------------------------|---|--|--|--------------------------------------|-----------------|
| | | | C O N T I N G E N T | U N L I Q U I D A T E D | D I S P U T E D | |
| Account No. xxxxxxxx2043 | | May 2008 Collector for Southern Hills Hosp 10697406 | | | | 0.00 |
| West Asset Management PO Box 790113 Saint Louis, MO 63179 | J | | | | | |
| Account No. xxxxxxxx9602 | | May 2009 Collector for Sothern Hills Hosp 9662356 | | | | 0.00 |
| West Asset Management 2703 North Highway 75 Sherman, TX 75090 | J | | | | | |
| Account No. xxxxxxxxxxxx xxx2599 | | Feb 2008 Collector for Shadow Emergency Physicians 9317448 | | | | 0.00 |
| West Asset Management 2703 North Highway 75 Sherman, TX 75090 | J | | | | | |
| Account No. xxxx36-00 | | Nov 02 Medical Services | | | | 530.00 |
| West Valley Imaging 6630 McCarran Ste 27 Reno, NV 89509 | J | | | | | |
| Account No. xxxx xx -xx4116 | | Jun 2009 Judgment for Tracy S Thompson | | | | 0.00 |
| Westley U. Villanueva 1771 E. Flamingo Road Ste. 112A Las Vegas, NV 89119 | J | | | | | |
| Sheet no. <u>53</u> of <u>54</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 530.00 |

B6F (Official Form 6F) (12/07) - Cont.

In re **Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODE DEBTOR | Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
|---|----------------|---|------------|--------------|----------|-------------------|
| | | | C | U | D | |
| Account No. x5544 | | Opened 12/01/93 Last Active 12/28/94 ChargeAccount | | | | |
| Wfnnb/express Attn: Bankruptcy Po Box 18227 Columbus, OH 43218 | H | | | | | 0.00 |
| Account No. x-xxxxxx1917 | J | July 2008 | | | | 54.34 |
| XM Satellite Radio PO Box 78054 Phoenix, AZ 85062 | | | | | | |
| Account No. | | | | | | |
| Account No. | | | | | | |
| Account No. | | | | | | |
| Sheet no. 54 of 54 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | Subtotal (Total of this page) | | | | 54.34 |
| | | Total (Report on Summary of Schedules) | | | | 528,408.65 |

In re **Tracy S Thompson,
Loryn G Taylor** Case No. _____

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.
State whether lease is for nonresidential real property.
State contract number of any government contract.

Diane England

Month to month lease

0

continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

In re

**Tracy S Thompson,
Loryn G Taylor**

Case No. _____

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

0

continuation sheets attached to Schedule of Codebtors

B6I (Official Form 6I) (12/07)

In re **Tracy S Thompson**
Loryn G Taylor

Case No. _____

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: | DEPENDENTS OF DEBTOR AND SPOUSE | |
|--|----------------------------------|---------------------|
| | RELATIONSHIP(S): None. | AGE(S): |
| Employment: | DEBTOR | SPOUSE |
| Occupation | Disability | Unemployment |
| Name of Employer | Disability | Unemployment |
| How long employed | | |
| Address of Employer | | |
| INCOME: (Estimate of average or projected monthly income at time case filed) | | |
| 1. Monthly gross wages, salary, and commissions (Prorate if not paid monthly) | \$ 0.00 | \$ 0.00 |
| 2. Estimate monthly overtime | \$ 0.00 | \$ 0.00 |
| 3. SUBTOTAL | \$ 0.00 | \$ 0.00 |
| 4. LESS PAYROLL DEDUCTIONS | | |
| a. Payroll taxes and social security | \$ 0.00 | \$ 0.00 |
| b. Insurance | \$ 0.00 | \$ 0.00 |
| c. Union dues | \$ 0.00 | \$ 0.00 |
| d. Other (Specify): _____ | \$ 0.00 | \$ 0.00 |
| 5. SUBTOTAL OF PAYROLL DEDUCTIONS | \$ 0.00 | \$ 0.00 |
| 6. TOTAL NET MONTHLY TAKE HOME PAY | \$ 0.00 | \$ 0.00 |
| 7. Regular income from operation of business or profession or farm (Attach detailed statement) | \$ 0.00 | \$ 0.00 |
| 8. Income from real property | \$ 0.00 | \$ 0.00 |
| 9. Interest and dividends | \$ 0.00 | \$ 0.00 |
| 10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above | \$ 0.00 | \$ 0.00 |
| 11. Social security or government assistance (Specify): VA Disability Unemployment | \$ 123.00 | \$ 0.00 |
| 12. Pension or retirement income | \$ 0.00 | \$ 1,800.00 |
| 13. Other monthly income (Specify): Financial Support from Family & Friends | \$ 0.00 | \$ 0.00 |
| 14. SUBTOTAL OF LINES 7 THROUGH 13 | \$ 1,673.00 | \$ 1,800.00 |
| 15. AVERAGE MONTHLY INCOME (Add amounts shown on lines 6 and 14) | \$ 1,673.00 | \$ 1,800.00 |
| 16. COMBINED AVERAGE MONTHLY INCOME: (Combine column totals from line 15) | \$ 3,473.00 | |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:
Loryn is expecting to return to work

B6J (Official Form 6J) (12/07)

In re **Tracy S Thompson**
Loryn G Taylor

Case No. _____

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

| | |
|--|--------------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ 1,300.00 |
| a. Are real estate taxes included? Yes <u> </u> No <u>X</u> | |
| b. Is property insurance included? Yes <u> </u> No <u>X</u> | |
| 2. Utilities: | |
| a. Electricity and heating fuel | \$ 215.00 |
| b. Water and sewer | \$ 175.00 |
| c. Telephone | \$ 45.00 |
| d. Other <u>See Detailed Expense Attachment</u> | \$ 130.00 |
| 3. Home maintenance (repairs and upkeep) | \$ 0.00 |
| 4. Food | \$ 350.00 |
| 5. Clothing | \$ 0.00 |
| 6. Laundry and dry cleaning | \$ 5.00 |
| 7. Medical and dental expenses | \$ 120.00 |
| 8. Transportation (not including car payments) | \$ 100.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ 40.00 |
| 10. Charitable contributions | \$ 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | |
| a. Homeowner's or renter's | \$ 0.00 |
| b. Life | \$ 0.00 |
| c. Health | \$ 507.00 |
| d. Auto | \$ 120.00 |
| e. Other <u>Prepaid Legal Services</u> | \$ 16.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) | \$ 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | |
| a. Auto | \$ 356.00 |
| b. Other | \$ 0.00 |
| c. Other | \$ 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ 0.00 |
| 17. Other <u>Gym Membership</u> | \$ 64.00 |
| Other | \$ 0.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ 3,543.00 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | |
| 20. STATEMENT OF MONTHLY NET INCOME | |
| a. Average monthly income from Line 15 of Schedule I | \$ 3,473.00 |
| b. Average monthly expenses from Line 18 above | \$ 3,543.00 |
| c. Monthly net income (a. minus b.) | \$ -70.00 |

B6J (Official Form 6J) (12/07)
In re Tracy S Thompson
Loryn G Taylor

Case No. _____

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)
Detailed Expense Attachment

Other Utility Expenditures:

| | | |
|---|----|---------------|
| Cable/Internet | \$ | 60.00 |
| Cell Phone | \$ | 70.00 |
| Total Other Utility Expenditures | \$ | 130.00 |

**United States Bankruptcy Court
District of Nevada**

In re Tracy S Thompson
Loryn G Taylor

Debtor(s)

Case No.

Chapter

7

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 71 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date July 15, 2010

Signature /s/ Tracy S Thompson
Tracy S Thompson
 Debtor

Date July 15, 2010

Signature /s/ Loryn G Taylor
Loryn G Taylor
 Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
 18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court
District of Nevada**

In re **Tracy S Thompson
Loryn G Taylor**

Case No.

Debtor(s)

Chapter

7

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

- None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|--------------------|-------------------------------------|
| \$60,108.00 | 2009: Wife Employment Income |
| \$67,972.00 | 2008: Wife Employment Income |

2. Income other than from employment or operation of business

- None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-----------------|---|
| \$738.00 | VA Disabilitiy @ \$123.00 monthly for Debtor |

| | |
|----------------------|--|
| AMOUNT \$4,800.00 | SOURCE Unemployment for Co Debtor \$400 weekly |
|----------------------|--|

3. Payments to creditors

None

 Complete a. or b., as appropriate, and c.

- a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS | AMOUNT PAID | AMOUNT STILL OWING |
|---------------------------------|----------------------|-------------|-----------------------|
|---------------------------------|----------------------|-------------|-----------------------|

None

- b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS/ TRANSFERS | AMOUNT PAID OR VALUE OF TRANSFERS | AMOUNT STILL OWING |
|------------------------------|------------------------------------|--|-----------------------|
|------------------------------|------------------------------------|--|-----------------------|

None

- c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR | DATE OF PAYMENT | AMOUNT PAID | AMOUNT STILL OWING |
|--|-----------------|-------------|-----------------------|
|--|-----------------|-------------|-----------------------|

4. Suits and administrative proceedings, executions, garnishments and attachments

None

- a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | | | |
|--|----------------------|---|--------------------------|
| CAPTION OF SUIT AND CASE NUMBER | NATURE OF PROCEEDING | COURT OR AGENCY AND LOCATION | STATUS OR DISPOSITION |
| First National Bank of Commerce | Judgement | Justice Court of Reno Township | Judgment |

vs.
Tracy Thompson
Case No J 88503 Dept 4

| | |
|---|---------------|
| Capital One Bank (U.S.A.), N. Summons and Complaint | Justice Court |
|---|---------------|

A.

vs.

Tracy Thompson,
DOES I through X and
ROE corporations I through
X inclusive
Case No. 09C-024116 Dept
12

| |
|---------------------------|
| Las Vegas Township |
| County of Clark, State of |
| Nevada |

Judgment

* Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| CAPTION OF SUIT AND CASE NUMBER | NATURE OF PROCEEDING | COURT OR AGENCY AND LOCATION | STATUS OR DISPOSITION |
|---|------------------------------|--|--------------------------|
| Citibank (South Dakota), NA vs. Loren G Taylor Case No. 08C-049848 | Summons and Complaint | Justice Court Clark County, Nevada | Judgment |
| Ronald Blaemore et al vs. Tracy Scott Thompson Case ID CV01-04740 | Civil | Second Judicial District Court Judgment State of Nevada, Washoe County | |

- None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED | DATE OF SEIZURE | DESCRIPTION AND VALUE OF PROPERTY |
|---|-----------------|--------------------------------------|
|---|-----------------|--------------------------------------|

5. Repossessions, foreclosures and returns

- None b. List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR OR SELLER | DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN | DESCRIPTION AND VALUE OF PROPERTY |
|---|--|--------------------------------------|
|---|--|--------------------------------------|

6. Assignments and receiverships

- None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF ASSIGNMENT OR SETTLEMENT |
|------------------------------|-----------------------|-----------------------------------|
|------------------------------|-----------------------|-----------------------------------|

- None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CUSTODIAN | NAME AND LOCATION OF COURT CASE TITLE & NUMBER | DATE OF ORDER | DESCRIPTION AND VALUE OF PROPERTY |
|----------------------------------|--|------------------|--------------------------------------|
|----------------------------------|--|------------------|--------------------------------------|

7. Gifts

- None b. List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON OR ORGANIZATION | RELATIONSHIP TO DEBTOR, IF ANY | DATE OF GIFT | DESCRIPTION AND VALUE OF GIFT |
|---|-----------------------------------|--------------|----------------------------------|
|---|-----------------------------------|--------------|----------------------------------|

8. Losses

- None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|--------------------------------------|--|--------------|
|--------------------------------------|--|--------------|

9. Payments related to debt counseling or bankruptcy

- None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|--|---|--|
| Haines & Krieger 1020 Garces Avenue Suite 100 Las Vegas, NV 89101 | 6/15/10 | 1400.00 |

10. Other transfers

- None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF TRANSFeree, RELATIONSHIP TO DEBTOR | DATE | DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED |
|---|------|---|
|---|------|---|

- None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY |
|----------------------------------|---------------------------|---|
|----------------------------------|---------------------------|---|

11. Closed financial accounts

- None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|--|--|---------------------------------------|
| Bank of America Brentwood District Br PO Box 37176 San Francisco, CA 94137-0176 | Checking Acct ending 5086 | 1767.88 on January 20, 2010 |
| Bank of America | Savings Acct ending 9100 | 14.32 closed on June 15, 2010 |
| Bank of America PO Box 25118 Tampa, FL 33622-5118 | Checking Acct ending 9090 | 1784.42 closed March 2010 |

12. Safe deposit boxes

- None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY | DESCRIPTION OF CONTENTS | DATE OF TRANSFER OR SURRENDER, IF ANY |
|--|---|-------------------------|---------------------------------------|
|--|---|-------------------------|---------------------------------------|

13. Setoffs

- None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|
|------------------------------|----------------|------------------|

14. Property held for another person

- None List all property owned by another person that the debtor holds or controls.

| NAME AND ADDRESS OF OWNER | DESCRIPTION AND VALUE OF PROPERTY | LOCATION OF PROPERTY |
|---------------------------|-----------------------------------|----------------------|
|---------------------------|-----------------------------------|----------------------|

15. Prior address of debtor

- None If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

| ADDRESS | NAME USED | DATES OF OCCUPANCY |
|---|--|----------------------------|
| 10090 Cranbrook Ln Las Vegas, NV 89148 | Tracy S Thompson Loryn G Taylor | Apr 2008 - Apr 2009 |
| 1204 Reading Way Rocklin, CA 95764 | Tracy S Thompson Loryn G Taylor | 2006 - 2007 |

16. Spouses and Former Spouses

- None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

| NAME |
|------|
|------|

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

- None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

| SITE NAME AND ADDRESS | NAME AND ADDRESS OF GOVERNMENTAL UNIT | DATE OF NOTICE | ENVIRONMENTAL LAW |
|-----------------------|---------------------------------------|----------------|-------------------|
|-----------------------|---------------------------------------|----------------|-------------------|

- None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

| NAME AND ADDRESS OF GOVERNMENTAL UNIT | DOCKET NUMBER | STATUS OR DISPOSITION |
|---------------------------------------|---------------|-----------------------|
|---------------------------------------|---------------|-----------------------|

18 . Nature, location and name of business

- None a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

| NAME | LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN | ADDRESS | NATURE OF BUSINESS | BEGINNING AND ENDING DATES |
|------|---|---------|--------------------|----------------------------|
|------|---|---------|--------------------|----------------------------|

- None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

| NAME | ADDRESS |
|------|---------|
|------|---------|

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date July 15, 2010

Signature /s/ Tracy S Thompson
Tracy S Thompson
Debtor

Date July 15, 2010

Signature /s/ Loryn G Taylor
Loryn G Taylor
Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

**United States Bankruptcy Court
District of Nevada**

In re Tracy S Thompson
Loryn G Taylor

Debtor(s)

Case No.

Chapter

7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

| | | |
|---|---|--|
| Property No. 1 | | |
| Creditor's Name: Mission Financial Svcs | Describe Property Securing Debt: 2001 Jaguar S Type aprox 90000 miles | |
| Property will be (check one): <input type="checkbox"/> Surrendered <input checked="" type="checkbox"/> Retained | | |
| If retaining the property, I intend to (check at least one): <input checked="" type="checkbox"/> Redeem the property <input checked="" type="checkbox"/> Reaffirm the debt <input type="checkbox"/> Other. Explain _____ (for example, avoid lien using 11 U.S.C. § 522(f)). | | |
| Property is (check one): <input checked="" type="checkbox"/> Claimed as Exempt <input type="checkbox"/> Not claimed as exempt | | |

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

| | | |
|---------------------------------|---------------------------|---|
| Property No. 1 | Describe Leased Property: | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
| Lessor's Name: -NONE- | | |

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

Date July 15, 2010

Signature /s/ Tracy S Thompson
Tracy S Thompson
 Debtor

Date July 15, 2010

Signature /s/ Loryn G Taylor
Loryn G Taylor
 Joint Debtor

**United States Bankruptcy Court
District of Nevada**

In re **Tracy S Thompson**
Loryn G Taylor

Debtor(s)

Case No.
Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

- Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|---|--------------------|
| For legal services, I have agreed to accept | \$ <u>1,400.00</u> |
| Prior to the filing of this statement I have received | \$ <u>1,400.00</u> |
| Balance Due | \$ <u>0.00</u> |

- \$ 0.00 of the filing fee has been paid.
- The source of the compensation paid to me was:

Debtor Other (specify):

- The source of compensation to be paid to me is:

Debtor Other (specify):

- I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
- In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]

- By agreement with the debtor(s), the above-disclosed fee does not include the following service:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: July 15, 2010

/s/ David Krieger, Esq.

David Krieger, Esq.

HAINES & KRIEGER, LLC

1020 Garces Ave.

Suite 100

Las Vegas, NV 89101

(702) 880-5554 Fax: (702) 385-5518

info@hainesandkrieger.com

**United States Bankruptcy Court
District of Nevada**

In re **Tracy S Thompson
Loryn G Taylor**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: July 15, 2010

/s/ Tracy S Thompson

Tracy S Thompson

Signature of Debtor

Date: July 15, 2010

/s/ Loryn G Taylor

Loryn G Taylor

Signature of Debtor

Tracy S Thompson
Loryn G Taylor
5336 Byron Nelson Ln.
Las Vegas, NV 89149

David Krieger, Esq.
HAINES & KRIEGER, LLC
1020 Garces Ave.
Suite 100
Las Vegas, NV 89101

AAACP
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PO Box 2662
Cedar City, UT 84721

Aargon Collection Agency
Acct No xxxxxxx1064
3025 West Sahara Ave
Las Vegas, NV 89102

Aargon Collection Agency
Acct No xxxxxxx1064
3025 W Sahara
Las Vegas, NV 89102

Account Control Technology
Acct No xxxxxxx8728
6918 Owensemouth Ave
PO Box 1489802
NTC2
Canoga Park, CA 91309-8012

Acs/wachovia Bank
Acct No xxxxxxx9221
Attn; Wachovia Education Finance
Po Box 7057
Utica, NY 13504

Acs/wachovia Bank
Acct No xxxxxxx9221
Acs Education Serv
Utica, NY 13501

Advantage Assets II inc
Acct No xxxx-xxxx-xxxx-0985
7322 SW Freeway Ste 1600
Houston, TX 77074

Alexandria Vaneck Co LPA
Acct No xxxxxxx9699
5660 Southwyck Blvd 110
Toledo, OH 43614

Alliance One
Acct No xxx8732
PO Box 1963
Southgate, MI 48195-0963

Allied Collection Serv
Acct No xxxxx4401
3080 S Durango Dr Ste 20
Las Vegas, NV 89117

Allied Interstate
Coldata Inc
PO Box 711477
Cincinnati, OH 45271-1477

American Asset Recovery
PO Box 1346
Roseville, CA 95678-1346

American Bureau of Credit Control
Acct No xx-x0802
PO Box 5321
Diamond Bar, CA 91765

American Medical Response
Acct No xxx0819
PO Box 3429
Modesto, CA 95353

Andrew Shields
Acct No xx0023
653 N Town Center Dr
Las Vegas, NV 89144

Anesthesiologists of Reno
Acct No xx9259
301 S Arlington Ave
Reno, NV 89501

ARM
Acct No xxxx5434
PO Box 129
Thorofare, NJ 08086-0129

Arrow Financial Services
Acct No xxx7945
21031 Network Place
Chicago, IL 60678

ASF Siddiqui, MD, Ltd.
Acct No xxx9581
PO Box 363159
North Las Vegas, NV 89036

Ashford University
Acct No xx1095
400 N Bluff Blvd
Clinton, IA 52732

Asset Acceptance LLC
Acct No xxxx4821
PO BOX 2036
Warren, MI 48090

Asset Acceptance LLC
Acct No xxxx5145
PO Box 50800
Phoenix, AZ 85076-0800

Associated Recovery Systems
Acct No xxxx3003
PO Box 463023
Escondido, CA 92046-3023

Atlantic Crd
Acct No xxx4752
P O Box 13386
Roanoke, VA 24033

Bank of America
Acct No xxxxxxxxxxxxxxxx & xxx xelow
ATTN Bankruptcy Department
PO Box 15298
Wilmington, DE 19850

Bank of America
Acct No xxxxxxxxxx & xxx xelow
1100 N King St
Wilmington, DE 19884

Barnfield Pet Hospital
Acct No xxxxxxxxxxx & xxxxxxxx7184
8000 NE Tillamook
PO Box 13998
Portland, OR 97213-0998

Beneficial
Acct No xxxxxx-xx-xxx423-2
PO Box 60101
City of Industry, CA 91716-0101

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Midvale, UT 84047

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2680 Crimson Canyon Dr
Las Vegas, NV 89128

Brian Lemper
Acct No xxxxx xxx x3166
9811 W Charleston
#2-389
Las Vegas, NV 89117

BUREAU OF COLLECTION RECOVERY
Acct No xxxx6341
WELLS FARGO BANK
7575 CORPORATE WAY
Eden Prairie, MN 55344

Business & Professiona
Acct No xxxxxxxx & xxx xelow
816 S Center St
Reno, NV 89501

Business & Professiona
Acct No xxx1546
816 S Center St
Reno, NV 89501

Business & Professiona
Acct No xxx9080
816 S Center St
Reno, NV 89501

Business & Professiona
Acct No xxx1465
816 S Center St
Reno, NV 89501

Business & Professiona
Acct No xxx1076
816 S Center St
Reno, NV 89501

CA Emergency Physicians
Acct No xxx xxxxxxx xxx xxx xx4896
P.O. Box 582663 Ste D-27
Modesto, CA 95358-0046

Canyon Gate Medical
Acct No x7221
2929 N Univeristy Dr Ste 110
Pompano Beach, FL 33065

Cap One
Acct No xxxxxxxx8098
Po Box 85520
Richmond, VA 23285

Cap One
Acct No xxxxxxxx0558
Po Box 85520
Richmond, VA 23285

Cap One
Acct No xxxxxxxx4191
Po Box 85520
Richmond, VA 23285

Capital Management Services
Acct No xxxx0782
726 Exchange Street
Buffalo, NY 14210

Capital Management Services
Acct No xxxx xxx xxxx 7908
726 Exchange Street
Buffalo, NY 14210

Capital Managemnet Services, LP
Acct No xxxx0782
726 Exchange Street, Suite 700
Buffalo, NY 14210

Capital One
Acct No xxxxxxxxxxxxxxxXXX
PO Box 60024
City Of Industry, CA 91716-0024

Capital One Auto Fiance
Acct No xxxxxx9940
P.O BOX 60511
City of Industry, CA 91716-0511

Capital One, N.a.
Acct No xxxxxxxx4306
2730 Liberty Ave
Pittsburgh, PA 15222

Cavalry Portfolio Services
Acct No xxx1374
PO Box 1030
Hawthorne, NY 10532

Cedar Anesthesia Group
Acct No xxxxxxxx xxx xx7817
1954 Fort Union Blvd
Ste 118
Salt Lake City, UT 84121-6993

Centennial Hills Hospital
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P.O. Box 31001-0827
Pasadena, CA 91110-0827

Centennial Pain
Acct No x3369
4454 N Decatur Blvd
Las Vegas, NV 89130

Center for Outpatient Surgery
Acct No x0547
343 Elm St
Ste 100
Reno, NV 89503-4504

CENTRAL CREDIT SERVICES
Acct No xxxx xxxx xxxx 0985
DEPT A
PO BOX 15118
Jacksonville, FL 32239-5118

Chase Bank
Acct No xxxx-xxxx-xxxx-7908
PO Box 36520
Louisville, KY 40233-6520

CHW Medical
Acct No xx-x3652
4132 S Rainbow Blvd
#330
Las Vegas, NV 89103-3106

CHW Needa Imaging
Acct No x9308
PO Box 60000 File 72938
San Francisco, CA 94160-2938

Citi
Acct No xxxxxxxx0270
Po Box 6241
Sioux Falls, SD 57117

Citi Cards
Acct No xxxx xxxx xxxx 0985
PO Box 689106
Des Moines, IA 50368-9106

Clark County Collectio
Acct No xx6498
8860 W Sunset Rd Ste 100
Las Vegas, NV 89148

Clark County Collectio
Acct No xx9877
8860 W Sunset Rd Ste 100
Las Vegas, NV 89148

Clark County Collectio
Acct No xx5440
8860 W Sunset Rd Ste 100
Las Vegas, NV 89148

Clark County Collection Service
Acct No xx7571, xx9203
8860 West Sunset Road Suite 100
Las Vegas, NV 89148

Clark County Collection Service
Acct No xx6780
8860 West Sunset Road Suite 100
Las Vegas, NV 89148

Client Services
Acct No xxx6117
3451 Harry Truman
Saint Charles, MO 63301

Collection Company of America
Acct No xx-xxxx9105
PO Box 567
700 Longwate Drive
Norwell, MA 02061

Credit Bureau
Acct No xxx5451
2980 S. Jones Blvd., Suite A
Las Vegas, NV 89146

Credit Collection Services
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Utica, NY 13501

CSI Card Services
Acct No xxx8876
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Ste D
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129 W. Lake Mead Pkwy B18
Henderson, NV 89015

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Westbury, NY 11590-5114

Diane England

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Po Box 5113
Englewood, CO 80155

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GLDVC101
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Apt 301
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Reno, NV 89570-0219

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1706 W 200 N
Cedar City, UT 84720

Dr/merch Cdt
Acct No xxxxxxxxxxxxxxxx5986
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Olathe, KS 66063-3330

Encore Receivable Management
Acct No xxxx4636
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Olathe, KS 66063-3330

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Acct No xxxx6088
8014 Bayberry Rd
Jacksonville, FL 32256

Enhanced Recovery Corporation
Acct No xxxx xxxx xxxx xx92 76
8014 Bayberry Rd.
Jacksonville, FL 32256-7412

Enterprise Recovery Systems
Acct No xx1095
PO Box 8030
Westchester, IL 60154-8030

Equitable Ascent Financial
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5 Revere Dr Ste 510
Northbrook, IL 60062-1570

Express Recovery Svcs
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2790 S Decker Lake Dr
Salt Lake City, UT 84119

First Bank of Commerce
Acct No xxxx-xxxx-xxxx-0522
Box One
Wichita, KS 67201

First Source Healthcare Advantage
Acct No xxx9561
7650 Magna Drive
Belleville, IL 62223

Fremont Emergency
Acct No xxxxxxxx xxx xx7571
PO Box1569
Las Vegas, NV 89125-1569

Fresn Cb Col
Acct No xxx1388
757 L Street
Fresno, CA 93721

Fresno Credit Bureau
Acct No xxx7154
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Fresno, CA 93714

Gardfield Hospital
Acct No See below
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PO Box 389
Panguitch, UT 84759

Gemb/dillards
Acct No xxxxxxxxx2238
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El Paso, TX 79998

General Revenue Corporation
Acct No xx1095
11501 Northlake Dr
Cincinnati, OH 45249-1618

Gerald A Phillips
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Reno, NV 89510

Global Credit Collection C
Acct No xxxx1687
300 International Drive
PMB 10015
Buffalo, NY 14221

Goodyearcbsd
Acct No xxxxxxxxxxxxxxx1576
Po Box 6497
Sioux Falls, SD 57117

Grandma's Kitchen
Acct No xxxxx2329
PO Box 7266
Pasadena, CA 91109-7366

Grant and Weber
Acct No xxxxxxx/xxxxxxxx7/N73
861 Coronado Center Drive
Suite 211
Henderson, NV 89052

Grant and Weber
Acct No xxxxxxx/xxxxxxxx-x/xxx & xxx belo
861 Coronado Center Drive
Suite 211
Henderson, NV 89052

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Acct No xx x9249
PO Box 994032
Redding, CA 96099-4032

Guthy-Renker
Acct No xx-xxx-xxxxx7150
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Harper & Harper LTD
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529 W 2nd St
Reno, NV 89503

Hfc - Usa
Acct No xxxxxxx8441
Po Box 3425
Buffalo, NY 14240

Hilco Rec
Acct No xxx8957
5 Revere Dr Ste 510
Northbrook, IL 60062

Hilco Rec
Acct No xxx3194
5 Revere Dr Ste 510
Northbrook, IL 60062

Hilco Rec
Acct No xxx8957
1120 West Lake Co
Buffalo Grove, IL 60089

Hilco Rec
Acct No xxx3194
1120 West Lake Co
Buffalo Grove, IL 60089

Hsbc Bank
Acct No xxxxxxxxxxxx2079
Attn: Bankruptcy
Po Box 5253
Carol Stream, IL 60197

Hsbc Bank
Acct No xxxxxxxxxxxx2104
Attn: Bankruptcy
Po Box 5253
Carol Stream, IL 60197

Hsbc Bank
Acct No xxxxxxxxx0394
Attn: Bankruptcy
Po Box 5213
Carol Stream, IL 60197

Hsbc Bank
Acct No xxxxxxxxxxxx2079
Po Box 5253
Carol Stream, IL 60197

Hsbc Bank
Acct No xxxxxxxxxxxx2104
Po Box 5253
Carol Stream, IL 60197

Hsbc Bank
Acct No xxxxxxxxx0394
Po Box 5253
Carol Stream, IL 60197

Hsbc/rs
Acct No xxxxxxxxxxxx6346
Attn: Bankruptcy
Po Box 5263
Carol Stream, IL 60197

Hsbc/rs
Acct No xxxxxxxxxxxx6346
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Acct No xxxxxx19-51
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PO Box 64887
Saint Paul, MN 55164

I.C. System, Inc.
Acct No xxxxxxxx-xxx-xx1-PR2
444 Highway 96 East
PO Box 64887
Saint Paul, MN 55164

IC System Inc
Acct No xxxxxxxx6-1-39
444 Highway 96 East
PO Box 64887
Saint Paul, MN 55164-0887

Integrity Home Health Care501
Acct No xxxx xxx x5630
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Las Vegas
Las Vegas, NV 89106-4832

International Medical Alliance
Acct No xxxxxxx0 983
5510 Birdcage St
Ste 100
Citrus Heights, CA 95610

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Insolvency
Philadelphia, PA 19114-0326

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Sauk Rapids, MN 56379

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Kathleen Olander
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Burlington, NC 27216

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Las Vegas, NV 89128

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7 Penn Plaza - 18th Floor
New York, NY 10001

Law Offices of Mitchell N. Kay, P.C.
Acct Noxxxxxxxxxxxx366-A
7 Penn Plaza - 18th Floor
New York, NY 10001

Law Offices of Mitchell N. Kay, P.C.
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7 Penn Plaza - 18th Floor
New York, NY 10001

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Lingo Phone Services
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7901 Jones Branch Dr
Mc Lean, VA 22102

LTD Financial Services
Acct No xxxx4769
7322 Souhtwest Freeway, Suite 1600
Houston, TX 77074

Ltd Financial Svcs Lp
Acct Noxxxxxxxxxxxx0985
7322 Southwest Fwy Ste 1
Houston, TX 77074

Lvnv Funding Llc
Acct Noxxxxxxxxxxxx8977
Po Box 740281
Houston, TX 77274

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Las Vegas, NV 89146

Marlin
Acct No xxxxxx & xx0146
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Philadelphia, PA 19101

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1100 N King St
Wilmington, DE 19884

Medequip
Acct No xx5018
32261 Camino Capistrano 101
San Juan Capistrano, CA 92675

Mellon Bank
Acct No xxxxxxxxx0190
10th & Market St
Wilmington, DE 19801

Mellon Bank De
Acct No xxxxxxxxx0190
4500 New Linden Hill Rd
Wilmington, DE 19808

Merchants Credit Guide
Acct No xxxxxxxx4693
223 W. Jackson Blvd
Chicago, IL 60606

Mercy American River Hospital
Acct No xx-xx-xxxxxxxx & xx8427
4747 Engle Rd
Carmichael, CA 95608

Mercy Healthcare Sacramento
Acct No xxx3538
PO Box 60000
San Francisco, CA 94160-3398

Midland Credit Management, Inc
Acct No xxxxxx1728
Dept 8870
Los Angeles, CA 90084-8870

Mil Star
Acct No xxxxxxxxx0056
Attention: Bankruptcy
Po Box 6250
Madison, WI 53716

Mil Star
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3911 Walton Walker
Dallas, TX 75266

Mission Financial Svcs
Acct No xxxxxxxxx1009
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PO Box 58363
Seattle, WA 98138

National Action Financial Services
Acct No xxxx8269
165 Lawrence Bell Dr., Suite 100
PO Box 9027
Buffalo, NY 14231-9027

National Business Fact
Acct No xxxxxxxx & xxx4495
969 Mica Dr
Carson City, NV 89705

NATIONAL PROFESSIONAL SVCS
Acct No xxxxxxxxxxxx & xxxxxxx8116
2235 E. FLAMINGO RD STE 405
Las Vegas, NV 89119-5197

National Revenue Corporation
4000 E 5th Ave
Columbus, OH 43219

Nations Bank aka Bank of America
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PO Box 31019
Tampa, FL 33631

Nations Recovery Center, Inc.
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6491 Peachtree Industrial Blvd.
Atlanta, GA 30360

NCO
Acct No xxx2356
Po Box 790113
St. Louis, MO 63149

NCO
Acct No xxxx7406
Po Box 790113
St. Louis, MO 63149

NCO
Acct No xxxx1822
Po Box 790113
St. Louis, MO 63149

NCO

NCO
Acct No xxx2356
2703 N Highway 75
Sherman, TX 75090

NCO
Acct No xxxx7406
2703 N Highway 75
Sherman, TX 75090

NCO
Acct No xxxx1822
2703 N Highway 75
Sherman, TX 75090

NCO Financial
Acct No xx2530
507 Prudential Rd
Horsham, PA 19044

NCO Financial
Acct No xxxxxxxx9602
10540 White Rock Rd Ste 250
Rancho Cordova, CA 95670

NCO Financial
Acct No xx9HEH
507 Prudential Road
Horsham, PA 19044

NCO Financial
Acct No xx1410
507 Prudential Road
Horsham, PA 19044

NCO Financial
Acct No xx4GB4
507 Prudential Road
Horsham, PA 19044

NCO Financial
Acct No xx8893
PO Box 41448
Philadelphia, PA 19101-1448

NCO Financial
Acct No xx1522
PO Box 15372
Wilmington, DE 19850-5372

NCO Financial
Acct No xx59LK
PO Box 17095
Wilmington, DE 19850-7095

NCO Financial
Acct No xxxxxxxx2043
5100 Peachtree Industrial Blvd
Ste L
Norcross, GA 30071

NCO Financial System Inc
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PO Box 13727
Sacramento, CA 95853

NCO Financial Systems
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Horsham, PA 19044

NCO Financial Systems
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Rancho Cordova, CA 95670

NCO Financial Systems
Acct No xxxx8834
10540 White Rock Rd Suite 250
Rancho Cordova, CA 95670

NCO Financial Systems
Acct No xxxx7450
Po Box 41726
Philadelphia, PA 19101

NCO Financial Systems Inc.
Acct No xx6813
507 Prudential Road
Horsham, PA 19044

Nco- Medclr
Acct No xxxx1341
Po Box 8547
Philadelphia, PA 19101

Nevada Energy
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PO Box 30086
Reno, NV 89520-3086

Nevada Orthopedic & Spine
Acct No xx6780
PO Box 36550
Las Vegas, NV 89133

NIk Walters Esq
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711 Jones St
Reno, NV 89503

North Shore Agency
Acct No xxxxxxxx3283
751 Summa Avenue
Westbury, NY 11590

Onyx Accep
Acct No xxxxxx9940
151 N Sunrise Ave
Ste 912
Roseville, CA 95661-2929

Orchard Bank/ HSBC
Acct No xxxx-xxxx-xxxx-2079
PO Box 60102
City Of Industry, CA 91716-0102

Outsource Receivables
Acct No xxxxxxxxxxxxx8317
Attn: Bankruptcy Dept
Po Box 166
Ogden, UT 84402

Outsource Receivables
Acct No xxxxxxxxxxxxx8317
3017 Taylor
Ogden, UT 84403

Pacific Coast Collections
Acct No xxx5530
4797 Ruffner St
San Diego, CA 92111-1519

Pacific Gas and Electric Company
Acct No xxxxxxxx3283
Barbara Green, Bankruptcy Unit
PO Box 8329
Stockton, CA 95208

Plus Four Inc.
Acct No x6916
PO BOX 95846
Las Vegas, NV 89193

Professional Bureau of Coll of Maryland
Acct No xxxx3667
Dept 11196
PO Box 1259
Oaks, PA 19456

Professional Recovery Consultants
Acct No xxxxxxxxxxxx xxx2599
2700 Meridian Parkway
Ste 200
Durham, NC 27713-2204

Progressive Mgmt Syste
Acct No xxxx8724
1521 W Cameron Ave Fl 1
West Covina, CA 91790

Providian/Washington Mutual
Acct No xxxx-xxxx-xxxx-1451
P.O. Box 660487
Dallas, TX 75266

Pyramid Health Center
Acct No xxxxxx22-00
2281 Pyramid Health Center
Sparks, NV 89431

Quantum Collection
Acct No xxxx-x0655
3224 Civic Center Dr.
North Las Vegas, NV 89036

Radiology Associates of Sac
Acct No xxxxx4034
SAC MED GROP INC
PO Box 160008
Sacramento, CA 95816-0008

Randy Delcore, MD
Acct No x9699
1335 N Northfield Rd 200
Cedar City, UT 84720

Randy Gubler, MD
Acct No xxx5451
653 town Center Dr 203
Las Vegas, NV 89144

Rausch, Strum, Israel & Hornik
Acct No xxxxxx & xx6284
8691 W Sahara Ave Suite 210
Las Vegas, NV 89117

Receivables Performanc
Acct No xxxx3516
P.o. Box 768
Bothell, WA 98041

Redline Recovery Services
Acct No xxxx8758
2350 North Forest Road Ste. 31B
Getzville, NY 14068

Reliant Captial Solution LLC
Acct No xx2901
750 Cross Pointe Rd
Ste G
Columbus, OH 43230

Remittance Assistance Corp
Acct No xxxxxxx & xxxxxxx8116
PO Box 20849
Reno, NV 89515-0849

Reno Orthopaedic
Acct No see below
555 N Arlington Ave
Reno, NV 89503

Reno Radiological Associates
Acct No xxxxxxx/xxx1112
5250 Neil Rd Ste 103
PO Box 30034
Reno, NV 89520-3034

Renown Health
Acct No xxxxxxx6127
PO Box 3006
Reno, NV 89520-3006

Retailers Credit Association
Acct No xx5497
830 Zion St
Nevada City, CA 95959

Retailers Credit Association
Acct No xx8427
830 Zion St
Nevada City, CA 95959

RevCare Incorporated
Acct No xxxxxxx8116
PO Box 2309
Cypress, CA 90630-1809

RevCare Incorporated
Acct No xxxxxxx9699
PO Box 2309
Cypress, CA 90630-1809

RevCare Incorporated
Acct No xxxxxxx3019
PO Box 2309
Cypress, CA 90630-1809

RJM
Acct No xxxxxxx9937
575 Underhill Suite 224
Syosset, NY 11791

RJM
Acct No xxxxxxxx8551
575 Underhill Suite 224
Syosset, NY 11791

RJM Acq Llc
Acct No xxxxxxx6387
575 Underhill Blvd Ste 2
Syosset, NY 11791

Roadloans.com
Acct No xxxxxxxxxxxxxxxx0001
Attn: Bankruptcy
5201 Rufe Snow Dr Ste 400
North Richland Hills, TX 76180

Roadloans.com
Acct No xxxxxxxxxxxxxxxx0001
5201 Rufe Snow Dr Ste 40
North Richland Hills, TX 76180

Rocklin Dental
Acct No xx0029
5800 Stanford N Ranch Rd
900
Rocklin, CA 95765

Ronald and Nancy Blakemore
Acct No xxx3573
10475 Double R Blvd
PO Box 11400
Reno, NV 89510-1400

Ronald Sherrod, DC
Acct No xxxx-1075
2221 sunset Blvd
#103
Rocklin, CA 95765

RPM Receivable Performance
Acct No xxxx3194
20816 44th Ave
Lynnwood, WA 98036

Sacramento Radiology
Acct No x-xxxxx1031
PO Box 276010
Sacramento, CA 95827-6010

Shadow Emergency Physicians
Acct No xxx xxxx x xccts
PO Box 13917
Philadelphia, PA 19101

Sheer Cover
Acct No xxxxx7150
PO Box 11448
Des Moines, IA 50336-1448

Shields Family Dentistry
Acct No xx0023
653 N Town Center Dr
Las Vegas, NV 89144-0514

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Acct No xx0023
653 N Town Center Dr
Las Vegas, NV 89144-0514

Sierra Nevada
Acct No xxxxxxxx5451
PO Box 60000
San Francisco, CA 94160-3429

SKO BRENNER AMERICAN INC
Acct No xxxx5505
40 DANIEL ST
Farmingdale, NY 11735

SKO Brenner American, Inc.
Acct No x xxx8876
PO Box 9320
Baldwin, NY 11510

SKO Brenner American, Inc.
Acct No xxxxx7150
40 Daniel St
PO Box 230
Farmingdale, NY 11735-0230

Sonoran Medical Imaging
Acct No 2696
7455 W. Washington Ave. #120
Las Vegas, NV 89128

Southern Utah MRI
Acct No xx699B
1335 N Northfield Rd
100
Cedar City, UT 84720

Spring Valley Medical Center
Acct No xxxxx8743
5400 S. Rainbow Blvd
Las Vegas, NV 89118

Sprint
Acct No xxxx-xxxx-xxxx-9785
PO Box 54977
Los Angeles, CA 90054-0977

Statefarm Insurance Company
One State Farm Plaza
Bloomington, IL 61710

Steinberg Diagnostic Med Imaging
Acct No x2792
PO Box 36900
Las Vegas, NV 89133-6900

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Tucson, AZ 85711

Summerlin Hospital
Acct No xxx2687
P.O. Box 31001-0827
Pasadena, CA 91110-0827

Sun City Foot Care
Acct No xxxx0001
653 Town Center Dr
Las Vegas, NV 89144-0516

Sutter Medical Foundation
Acct No xxx7916, xxx0579
PO Box 255228
Sacramento, CA 95865-5228

Sutter Roseville Medical Center
Acct No see below
PO Box 160100
Sacramento, CA 95816

Sutter Roseville Medical Center
Acct No xxxx1067
PO Box 13727
Sacramento, CA 95853

Swope Medical Group
Acct No x2829
PO Box 805
Nevada City, CA 95959

Target
Acct No x6259
Po Box 9475
Minneapolis, MN 55440

Target
Acct No x6259
Po Box 673
Minneapolis, MN 55440

Trojan Professional Se
Acct No xxxxxxxxxxxxxxx5339
4410 Cerritos Ave
Los Alamitos, CA 90720

UC Davis Medical Center
Acct No xxx4521
2315 Stockton Blvd
Sacramento, CA 95817

UC Davis Medical Center
Acct No xxxx5212
File # 81067, Box 60000
San Francisco, CA 94160

UMC
Acct No xxxx5594
P.O. Box 749556
Los Angeles, CA 90074-9556

United Collect Bur Inc
Acct No xxxx4046
5620 Southwyck Blvd Ste
Toledo, OH 43614

United Collection
Acct No xxxxxxxxxxx & xxxx4874
5620 Southwyck Boulevard
Suite 260
Toledo, OH 43614

United Collection Bureau
Acct No xxxxxxx6127
5620 Southwyck Boulevard
Suite 206
Toledo, OH 43614

United Recovery System /Home Depot
Acct No xxx2860
PO Box 722910
Houston, TX 77272

United Recovery Systems
Acct No xxxx7635
PO Box 722929
Houston, TX 77272

University Of Phoenix
Acct No xxxxxxxx8728
4615 E Elwood St Fl 3
Phoenix, AZ 85040

Unvl/citi
Acct No xxxxxxxxx2513
Po Box 6241
Sioux Falls, SD 57117

Valley View Medical
Acct No xxxxxxxx5913
4646 W Lake Park Blvd
Salt Lake City, UT 84130-0191

Valley View Medical
Acct No xxx-xxxxxxx & xxx-xxxxx3120
1303 N Main
Cedar City, UT 84720

Van Ru Credit Corporation
Acct No xxxx-xxxx-xxxx-7908
1350 E Touchy Ave
Suite 100E
Des Plaines, IL 60018-3307

Vital Recovery Services, Inc.
Acct No xxxx5749
PO Box 923748
Norcross, GA 30010-3748

Wach Ed Fin
Acct No xxxx8450
Notifications go to servicer of loan not

Wach Ed Fin
Acct No xxxx8212
Notifications go to servicer of loan not

Wach Ed Fin
Acct No xxxx1009
Notifications go to servicer of loan not

Wach Ed Fin
Acct No xxxx4443
Notifications go to servicer of loan not

Wach Ed Fin
Acct No xxxx8238
Notifications go to servicer of loan not

Wach Ed Fin
Acct No xxxx4456
Notifications go to servicer of loan not

Wach Ed Fin
Acct No xxxx8450
Po Box 13667
Sacramento, CA 95853

Wach Ed Fin
Acct No xxxx8212
Po Box 13667
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Wach Ed Fin
Acct No xxxx1009
Po Box 13667
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Wach Ed Fin
Acct No xxxx4443
Po Box 13667
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Wach Ed Fin
Acct No xxxx8238
Po Box 13667
Sacramento, CA 95853

Wach Ed Fin
Acct No xxxx4456
Po Box 13667
Sacramento, CA 95853

Wachovia/acs
Acct No xxxxxxx9223
501 Bleecker St
Utica, NY 13501

Wachovia/acs
Acct No xxxxxxx9224
501 Bleecker St
Utica, NY 13501

Wachovia/acs
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501 Bleecker St
Utica, NY 13501

Washington Mutual / Providian
Acct No xxxxxxxx8816
Attn: Bankruptcy Dept.
Po Box 15919
Wilmington, DE 19850

Washington Mutual / Providian
Acct No xxxxxxxx7908
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Wilmington, DE 19850

Washington Mutual / Providian
Acct No xxxxxxxx8816
Bank One Card Serv
Westerville, OH 43081

Washington Mutual / Providian
Acct No xxxxxxxx7908
Bank One Card Serv
Westerville, OH 43081

Washoe Medical Center
Acct No xxxxxxx/xxxxxx-1/N77
861 Coronado Center Dr
Ste 211
Henderson, NV 89052

Washoe Medical Center
Acct No see below
File 50000
Los Angeles, CA 90074-0001

Washoe Medical Center
Acct No xxxxxxxxxxx & xxxxx8116
PO Box 30006
Reno, NV 89520-3006

Wells Fargo Bank
Acct No xxxxxxxxxxx & xxxxx9276
PO Box 3696 MAC:P6053-021
Portland, OR 97208-3696

Wendell Gibby, MD
Acct No xxxxxx0069
280 W Riverpark Dr
Ste 100
Provo, UT 84604-5765

West Asset Management
Acct No xxxxxxxxxxx & xxxxxxx9602
2703 North Highway 75
Sherman, TX 75090

West Asset Management
Acct No xxx1822
2703 North Highway 75
Sherman, TX 75090

West Asset Management
Acct No xxxxxxxx2043
PO Box 790113
Saint Louis, MO 63179

West Asset Management
Acct No xxxxxxxx9602
2703 North Highway 75
Sherman, TX 75090

West Asset Management
Acct No xxxxxxxxxxxx xxx2599
2703 North Highway 75
Sherman, TX 75090

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Ste 27
Reno, NV 89509

Westley U. Villanueva
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1771 E. Flamingo Road
Ste. 112A
Las Vegas, NV 89119

Wfnnb/express
Acct No x5544
Attn: Bankruptcy
Po Box 18227
Columbus, OH 43218

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4590 E Broad St
Columbus, OH 43213

XM Satellite Radio
Acct No x-xxxxxx1917
PO Box 78054
Phoenix, AZ 85062